

## LETTER FROM THE SECRETARY



Melissa Magstadt, Secretary of Health

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REFLECTING ON THIS YEAR'S INITIATIVES, I **AM IMMENSELY** PROUD OF OUR **PROGRESS IN** STRENGTHENING COMMUNITY PARTNERSHIPS. **EXPANDING HEALTHCARE** ACCESS, AND **ADVANCING THE WELL-BEING** OF ALL SOUTH DAKOTANS.

It's my honor to present the South Dakota Department of Health's (DOH) 2024 Annual Report. This year, our team made significant strides in strengthening community partnerships, expanding healthcare access, and enhancing the well-being of all South Dakotans. Our mission (page 67) remains grounded in the belief that every resident deserves accessible, compassionate, and high-quality healthcare, regardless of where they live.

One of our biggest accomplishments, as it ties back to access to care, happened right away in the spring with the successful launch of **Wellness on Wheels (WOW)**. These mobile clinics bring critical healthcare services to underserved and rural communities. WOW mobile clinics offer vital resources; including WIC support, immunizations, maternal health screenings, oral health services, and developmental assessments. By focusing on the First 1,000 Days of life, WOW ensures families have access to the care and support needed for healthy development, addressing barriers across all of South Dakota.

We remain committed to supporting moms and babies throughout their lives. Programs such as **Bright Start** and the **Pregnancy Care Program** provide essential support, while initiatives like safe sleep education and substance use treatment protect our youngest residents. Together, these efforts reflect our dedication to reducing maternal and infant mortality while promoting health equity statewide.

A key focus throughout 2024 has been **deepening connections with communities**, particularly in tribal areas. In June, I joined Division Director Emily Kiel in Rapid City for a quarterly task force meeting with Indian Health Services and the Oglala Sioux Tribe. This was the first time our department has ever been invited to attend a meeting like this. And we were truly honored. Together, we addressed pressing public health priorities, including access to care and emergency medical services, H5N1, syphilis, and infant mortality. These discussions have fostered collaborative solutions such as the *Wellness on Wheels* initiative, distribution of LifePak 15 devices to tribal partners, equipping ambulances with Telemedicine in Motion, along with planning the launch of online shopping in Pine Ridge and Mission for WIC recipients.

For the first time ever, the cabinet secretary participated in the **2024** *Lakota Lands Traveling Seminar and Health Disparities Symposium*, sponsored by Monument Health. This united public health leaders, educators, and community members to explore Lakota healthcare disparities while fostering dialogue, partnerships, and deeper insights into South Dakota's public health challenges.

In 2024, the South Dakota Department of Health hosted impactful events, including the first-ever *South Dakota Indigenous & Integrative Health Summit* (page 66), the *Healthcare Revolution Summit* (page 64), and the *10th Annual Health Link Fall Forum* (page 66), showcasing innovation

## LETTER FROM THE SECRETARY







Left: Secretary Melissa Magstadt and Division Director Emily Kiel, traveled to Rapid City to join Joe Amiotte and his leadership team with Indian Health Services as they led their quarterly task force meeting with the Oglala Sioux Tribe.

Middle: Secretary of Health, Melissa Magstadt (pictured with Lexi Ortiz) presented on the state's Top Public Health Priorities and sat on the syphilis panel alongside Kacee Redden-Benz (DOH STI Program Manager) at the 2024 Lakota Lands Traveling Seminar and Health Disparities Symposium, sponsored by Monument Health.

Right: Secretary Melissa Magstadt presents at the Creating Healthy & Wealthy Communities Grant Writing Workshop.

in public health and healthcare. Additionally, the *Creating Healthy & Wealthy Communities Grant Writing Workshop* (page 64) brought leaders together to build healthier, more vibrant communities, highlighting DOH's commitment to collaboration and progress statewide.

We concluded our five-year **strategic plan** and developed a plan for 2025-2027. The newly developed strategic plan is rooted in community engagement, health equity and outcomes, healthcare workforce, data and technology, quality improvement, and fiscal sustainability.

The creation of the **Grant Governance Team** marked another key milestone. Supported by the federally funded Public Health Infrastructure Grant (PHIG), which provided \$14 million to enhance state and local health department capacity, this team has transformed grants management and operations within the department. By standardizing processes, developing training resources, and improving online access to tools, the team continues to streamline operations and maximize funding opportunities.

I want to extend gratitude to our dedicated DOH team, our partners, and the communities we serve. My leadership team and I could not do our jobs without any of them. Together, we are laying the groundwork for a healthier South Dakota by improving accessibility, fostering collaboration, and ensuring quality healthcare for all. Thank you for your trust, support, and commitment to building a healthier state for current and future generations.

Melissa Magstadt Cabinet Secretary South Dakota Department of Health



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## **Our Story**

At the heart of our mission is a simple yet profound goal: to protect and improve the health of all South Dakotans. We are entrusted with the vital task of promoting wellness, preventing disease, and ensuring access to quality healthcare for individuals and families across our great state.

Just like a steady hand leading the way, we work closely with healthcare providers, community organizations, and governmental agencies to champion health initiatives and deliver essential services. Our reach extends into every corner of South Dakota, empowering individuals with the tools and resources they need to lead healthier lives.

Our story is also one of adaptability. From addressing emerging health threats to providing swift responses during crises, we are the backbone of public health preparedness in South Dakota. Through these challenges, our commitment to the well-being of our residents remains unwavering.

Just as different parts of nature work together in our state's landscapes, we recognize the importance of partnerships in public health. By working together with local communities, healthcare providers, and dedicated professionals, we create a strong foundation for a healthier South Dakota.

Our narrative is enriched by the lives we touch, the communities we empower, and the individuals who make healthier choices because of our efforts. We celebrate the stories of wellness triumphs, the successes of health promotion campaigns, and the impact of our educational initiatives.

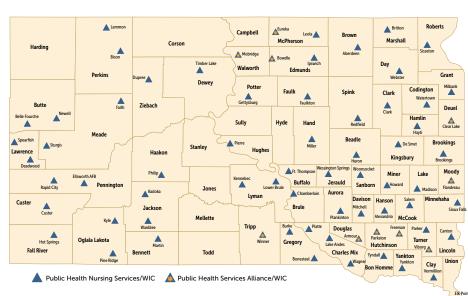
As the gateway to health information in South Dakota, our website serves as a hub of valuable resources, guidance, and up-to-date health information. We are here to support you on your journey to better health, offering information on topics ranging from immunizations and family health to environmental health and disease prevention.

Our commitment to the health and well-being of South Dakotans shapes our vision for the future. We envision a state where every individual has the opportunity to lead a healthy and fulfilling life, where communities thrive through wellness, and where our shared commitment to health unites us.

Join us on a journey toward better health, for yourself, your family, and your community. Together, we are building a healthier South Dakota—one step, one choice, and one story at a time.

## **Staff Overview**





## **Agency Leadership**



Melissa Magstadt, Secretary of Health



Lynne Valenti, Deputy Secretary Division Director, Licensure and Accreditation



Emily Kiel, Division Director, Healthcare Access



Beth Dokken, Division Director, Family and Community Health



Darcy McGuigan, Division Director, Finance and Operations



Tim Southern, Administrator, Public Health Laboratory



Josh Clayton, State Epidemiologist

## **DOH Culture**

## **WORK-LIFE BALANCE**

The South Dakota Department of Health values flexibility in the workplace. Part of that flexibility includes the ability to work from home. Working from home is a meaningful way to meet individual needs, wants, and desires when it comes to balancing the entire team's home and work lives. That balance is something we value while allowing most positions the opportunity to work remotely up to 3 days a week. Working from home is a privilege and is subject to review depending upon the position.

## PROFESSIONAL DEVELOPMENT

We are committed to the professional growth and development of our employees. We provide opportunities for training, continuing education, and advancement within the organization.

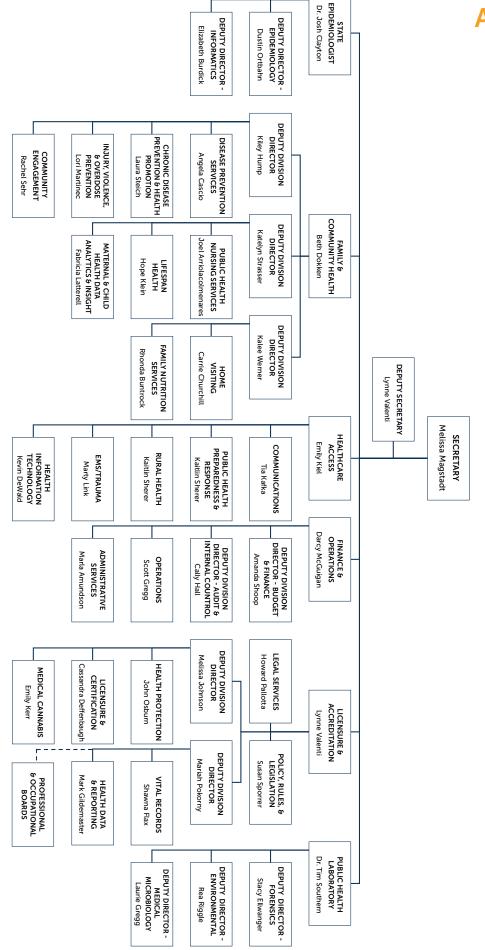
## **MEANINGFUL WORK**

Working at the SD DOH gives employees the opportunity to make a meaningful difference in the lives of South Dakotans. Employees contribute to public health initiatives, disease prevention efforts, emergency preparedness, and much more.

## COLLABORATIVE ENVIRONMENT

We foster a collaborative and supportive work environment, where teamwork and idea-sharing are encouraged. You'll have the opportunity to collaborate with professionals from various disciplines and contribute to multidisciplinary projects.

# **Organizational Structure**



## STATE PUBLIC HEALTH LABORATORY

The State Public Health Laboratory provides Medical Microbiology, Environmental Chemistry, and Forensic Chemistry testing services to clients and partners throughout South Dakota. The mission of the public health laboratory is to protect the public's health through high-quality testing services. These services include testing for infectious diseases such as foodborne pathogens, respiratory pathogens, and mosquito borne disease. The state public health laboratory also provides comprehensive water testing services to ensure South Dakota's water is safe for consumption, recreation, and agriculture. The state public health laboratory also provides drug and toxicology testing.

## EPIDEMIOLOGY, SURVEILLANCE, AND INFORMATICS CENTER (ESIC)

The South Dakota Department of Health's Epidemiology, Surveillance, and Informatics Center (ESIC) is responsible for infectious disease investigations related to enteric, respiratory, vaccinepreventable, vectorborne, and zoonotic diseases. ESIC maintains and enhances our electronic disease surveillance system, ensures receipt of electronic data from hospitals, labs, and medical providers, and creates data visualizations such as maps and dashboards to make data more accessible. ESIC's mission is to improve the health and well-being of South Dakotans by monitoring disease, providing education, communicating timely, and collaborating with community partners to prevent disease.

## FINANCE AND OPERATIONS

The Division of Finance and Operations is responsible for financial operations and administrative services for the department. The Division works efficiently to maintain proper internal controls and to ensure federal, state, and department policies and regulations are met. The Finance team is responsible for accounting services, financial reporting, cost allocation, purchasing, contracts, subrecipient monitoring, records management, and accounts payable. The Operations team supports the department with space management and administrative support.

## **HEALTHCARE ACCESS**

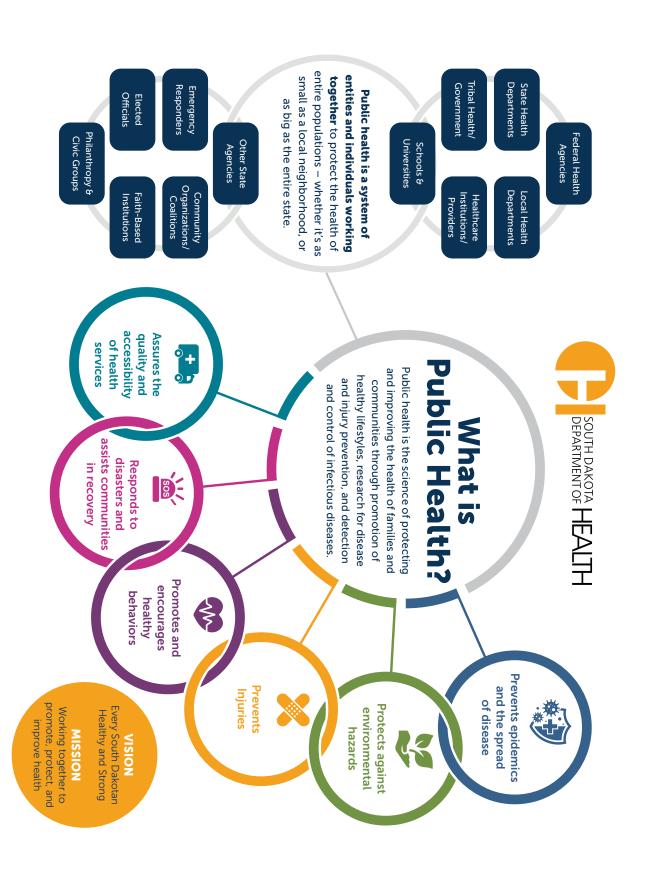
The purpose of the Division of Healthcare Access is to provide and enhance access to timely, highquality healthcare services while maintaining relevancy. The Division exists to expand rural emergency medical services via telehealth and other life-saving equipment, enhance recruitment and retention opportunities while proactively building a pipeline to the healthcare workforce, and effectively plan and prepare for public health threats to ensure individuals and families are wellinformed. None of these can be done without using the latest information systems, technology, and communication strategies to ensure we provide excellent customer service and meet our customers where they are in their healthcare journey.

## **FAMILY AND COMMUNITY HEALTH**

The mission statement of the Division of Family and Community Health is to design, implement, and administer a network of health services, education, and prevention programs to aid the residents of South Dakota to develop and maintain a healthier lifestyle and achieve the highest possible quality of life. The division provides a variety of public health services and programming across South Dakota to accomplish its mission.

## LICENSURE AND ACCREDITATION

The mission of the Division of Licensure and Accreditation is protecting and promoting the health and well-being of South Dakota citizens by surveying and licensing healthcare facilities; protecting the public from sanitation and safety hazards by inspecting and licensing food services, lodging establishments, and campgrounds; operating the state's medical cannabis program ensuring an accessible, safe and responsible program; maintaining the state's vital records data including birth, death, marriage and divorce records; overseeing the collection and quality of that data and overseeing the evaluation and dissemination of our state's health data; and spearheading our agency work regarding accreditation and continuous quality improvement.



## **Internal Excellence**

## **GRANT GOVERNANCE**

One of the outcomes of PHIG that we are most proud of is forming a **Grant Governance Committee**.

This group is charged with establishing standardized processes for managing grants across the department. This committee is leading key initiatives such as the development of comprehensive training manuals and resources for grant managers, streamlining the grant management process, and enhancing workforce development. The committee is working to improve our online resources, providing program managers with easier access to training materials, guides, and tools.

With a strong focus on quality improvement and process efficiency, the committee is ensuring that grant management is less burdensome and more effective. Additionally, the committee is exploring new strategies to identify grant opportunities, including enhancing internal systems to better track large-scale funding sources and ensure that shovel-ready projects are identified and supported.

These efforts have strengthened our ability to secure and manage grants, directly contributing to more impactful health initiatives across the state.

## LEADERSHIP IN EXCELLENCE WITH AWESOME PEOPLE (LEAP)

The **LEAP Planning Committee** is a forward-focused, results-oriented group aimed at fostering leadership development within the department. Its primary goals are to design and implement a structured leadership development plan, communicate growth opportunities, and organize the annual LEAP Leadership Forum. The committee is committed to supporting leaders across various experience levels to enhance their professional growth and impact.

In October 2024, the South Dakota Department of Health (DOH) Management Team gathered in Fort Pierre for the second annual **LEAP Development Workshop**. This workshop offered a unique opportunity for DOH leaders to strengthen their skills, share insights, and foster teamwork.



On the first day, participants engaged in an immersive leadership training session led by BHRA Trainer Kathy Hildabrant. Titled "Leadership Lessons: Band of Brothers," the course creatively intertwined John Maxwell's *Five Levels of Leadership* with insights from the HBO series Band of Brothers, encouraging attendees to reflect on their personal leadership journeys and explore ways to enhance their effectiveness as leaders.

The second day opened with a creative teambuilding icebreaker, where participants visualized and shared their perspectives on leadership. The agenda continued with presentations from peers on the Governor's Leadership Development Program, including impactful capstone projects and an insightful panel discussion. The day concluded with inspiring stories from DOH supervisors, who showcased innovative tactics and successful projects they've implemented to empower their teams.

The LEAP Workshop underscored the department's commitment to leadership excellence and professional growth, equipping DOH leaders with practical tools to lead with vision and resilience in the evolving public health landscape.

## DATA MODERNIZATION & IT STEERING COMMITTEE

In 2024, the South Dakota Department of Health made significant strides in **data modernization**, leveraging innovative tools and targeted strategies to enhance public health outcomes. A notable accomplishment was the use of CDC's Epidemiology and Laboratory Capacity (ELC) funding to **improve geocoding capabilities**, resulting in a 36% increase in geocoded addresses. This achievement had a profound health equity impact, with geocoding accuracy on tribal lands improving by 395% compared to a 27% increase in the rest of the state. These enhancements facilitated the creation of Tribe-specific infectious disease dashboards,

ensuring better resource allocation and data-driven decision-making across communities.

Building on its success in geocoding improvements, the department implemented several initiatives to modernize its data and IT infrastructure. The IT Steering Committee was established as a critical governance body, ensuring modernization efforts align with long-term goals while fostering collaboration across teams. Additionally, the creation of an IT systems inventory has streamlined decisionmaking by providing a centralized knowledge base of nearly 100 systems, allowing efficient resource sharing and modernization prioritization. A new web-based vital records system, set to launch in 2025, promises to improve accessibility and interoperability by integrating with South Dakota Health Link and Maven surveillance systems. Through targeted hiring under the Workforce Acceleration Initiation Award, the department also filled three critical positions, supporting the capacity to manage, govern, and advance data systems for lasting public health benefits.

## **WORKPLACE WELLNESS COMMITTEE**

WorkWell DOH is the Department of Health's wellness committee where the mission is to maintain the personal and professional productivity, physical health, and mental health of the Department of Health's work force. The DOH worksite wellness committee provides opportunities for employees to develop healthier lifestyles by supporting the adoption of habits and attitudes that contribute to their positive well-being.

The committee consists of employees from various Department of Health office locations to contribute insight and organize in-office activities. The Wellness Committee developed an action plan for monthly newsletters aimed at educating staff on a range of topics while offering activities to employees to enhance overall wellness. An employee wellness survey revealed that the most significant areas of wellbeing that staff are interested in learning more about are mental/emotion wellbeing, physical health, and financial wellness. We have utilized these findings

to shape the committee's action plan while also incorporating resources tailored to employees who are working full-time remote or hybrid schedules.

In addition to the newsletters, many DOH locations have engaged in onsite activities organized by the committee. These activities include hosting multiple blood drives, volunteering at nonprofit organizations, participating in community clean-up efforts, and holding employee appreciation events on-site.

## **WORKPLACE SAFETY COMMITTEE**

A safe workplace can help prevent injuries, illness, and even death. It can also help employees feel less anxious or stressed, which can lead to better mental health. It is proven that a safe workplace can lead to increased productivity and efficiency. Employees are also less likely to be absent due to illness or accidents as a result of a safe work environment. Just like we value the health and well-being of our employees here at the Department of Health, we simultaneously value your safety and security in the workplace. Late in the fall, we announced the kickoff of a workplace safety committee and invited all employees to consider being part of this ongoing effort. This team of employees will meet quarterly to develop, implement, and oversee initiatives that enhance employee safety protocols and training within the Department of Health. The committee will drive key deliverables to ensure a safe work environment. This will not replace any current, local office management teams.

### Committee members will:

- Develop adaptable safety policies, guides, or plans for each DOH work location using the Sioux Falls plan as a model.
- Create training for all staff on SD TRAIN which can be integrated into the suite of trainings for new employee orientation.
- Perform Annual Safety Drills.
- Champion the Emergency Alerting System.
- Other workplace safety projects as needed.

## **Awards & Recognition**



The Department of Health was honored to receive the 2023 Partner of the Year award from the South Dakota Department of Tribal Relations for our work in helping with the 2023 STOMP Summit and addressing critical health issues impacting our tribal population.



After a year of learning, growth, and collaboration with her Cohort 18 colleagues, **Beth Dokken** araduated

from the **Great Plains Leadership** Institute, which is part of the University of Nebraska Medical Center's College of Public Health. The institute brings together public health professionals from multiple states to develop and strengthen their leadership skills.

## The 2024 USDA WIC

**Breastfeeding Award of Excellence** recognizes local WIC agencies that excel in promoting and supporting breastfeeding. This year, three South Dakota WIC agencies—Custer, Viborg, and Yankton—earned Gold Awards, celebrating their exceptional breastfeeding programs. Additionally, for the first time ever in South Dakota, two agencies, Sisseton and Rapid City, received

the prestigious Premiere

Awards. These awards come with rigorous criteria, including higher breastfeeding rates, highlighting

the agencies' outstanding efforts in fostering a breastfeedingfriendly environment.



Congratulations to Sierra Phelps in the South Dakota tobacco control program who was recently elected to the 2024-2025 **Tobacco Control** 

**Network Executive Committee.** The Tobacco Control Network is a CDC-founded national collective of state and territorial tobacco control programs.

## **Leadership Awards**

Each year the Office of the Secretary presents awards to Department of Health employees in the following categories

Outstanding Contribution to Public Health: significant contributions to public health over a career

Excellence in the Workplace: outstanding performance in the past year

Rising Star: newer department employee making significant contribution

Partner in Health: outside organization/business whose dedication to public health and community well-being is exemplary



Jill Munger received the **Outstanding Contribution to** Public Health award.



Roberta Hofeldt received the **Outstanding Contribution to** Public Health award.



Cassandra Deffenbaugh received the Excellence in the Workplace award.

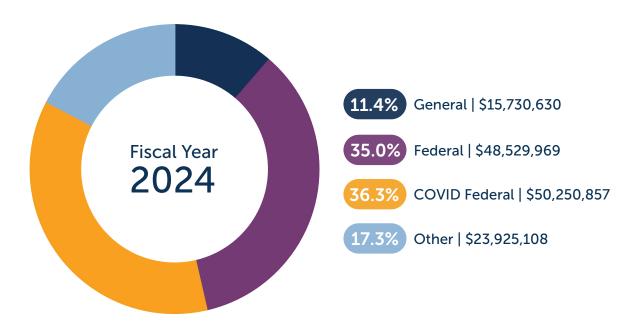


Anita Bharadwaja received the Rising Star award.

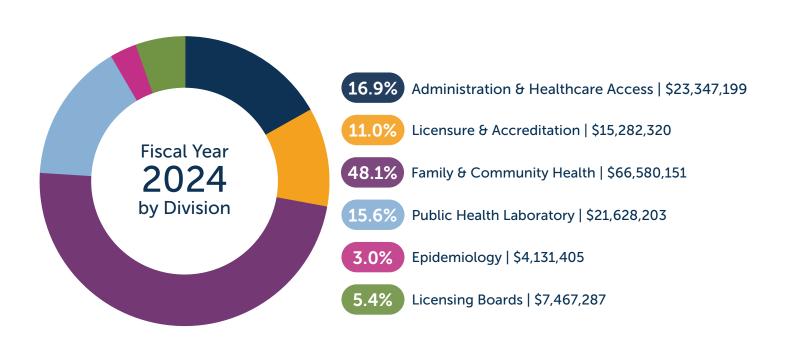


Beth Walstrom from the SDSU Population Health Evaluation Center was awarded the **Partner in Health** award.

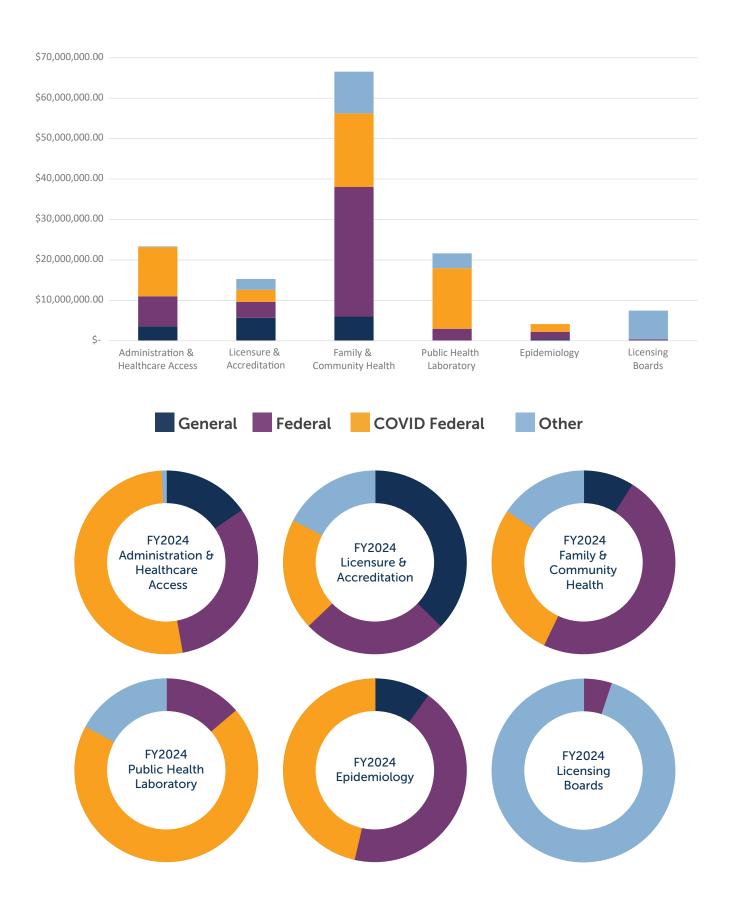
## FINANCE & OPERATIONS



## **FY24 Expenditures** \$138,436,564



## FINANCE & OPERATIONS



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## **DOH Workforce Development and Education Center Ground-breaking Event**



April 23, 2024, marked a historic moment with the ground-breaking of our new **DOH Workforce Development and Education Center.** Special thanks to Secretary Magstadt for expertly emceeing this event and welcoming Governor Kristi Noem, who inspired us with her vision for the next generation of workforce development.

We were also honored by speeches from Mayor Steve Harding of Pierre, emphasizing the transformative impact this center will have on our city through strengthened partnerships. Dr. Tim Southern gave us a glimpse into the future, highlighting how this facility will enhance the performance of our state-of-the-art public health lab.

A big thank you to Mark Averett from TSP, Inc., and Mark Puetz from Puetz for their insights into the unique aspects of this project and their ongoing partnership in healthcare and education infrastructure.

And lastly, thanks to all the members of DOH in their efforts continuing to promote, protect, and improve the health of every South Dakotan.

This center represents a leap forward for public health in South Dakota, promising innovative advancements and educational opportunities. Stay tuned for more updates as we build towards a healthier future!







## **DOH Campus**

In 2024, construction began on the new Department of Health Workforce Development and Education Center, designed to **consolidate DOH staff into one facility**, replacing separate offices within the capital complex. A state-of-the-art public health laboratory will be a key feature, equipped to address evolving public health challenges.

The center will include a variety of collaboration spaces, such as small huddle rooms, large multi-purpose training rooms, and a fully equipped training lab. These areas will support workforce development through hands-on training and education. Additionally, the center will provide public access to health monitoring services, including blood pressure testing and telemedicine.

The **new laboratory** is expected to be operational by June 2026, with the remainder of the facility scheduled for completion by June 2027. During construction, the existing public health laboratory will continue offering medical, environmental, and forensic testing services.





## Sioux Falls One Stop

The Sioux Falls One Stop is set to open after years of planning, with state agencies beginning to occupy the facility in the first quarter of 2025. The Department of Health is scheduled to move in by June 2025. This innovative facility will unite more than 600 employees from **13 state agencies**, currently dispersed across Sioux Falls.

The One Stop concept will simplify access to state services by providing customers with a single, centralized location, eliminating the need for multiple site visits. It will also enhance interagency collaboration and referrals. The facility is designed with safety and security in mind and includes flexible collaboration spaces to accommodate groups of various sizes, including events for more than 200 people.





## STATE PUBLIC HEALTH LABORATORY

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## **Customer Service in Forensic Testing**

In late 2023, the South Dakota Department of Health convened an advisory group to support the state public health laboratory's toxicology and drug testing programs. The advisory group is composed of senior leaders in the Department of Health and representatives from the Attorney General's Office, State's Attorney's Association, Highway Patrol, Sheriff's Association, Police Chief's Association, and Unified Judicial System. The following are just a few of our achievements from 2024.

## **ACCREDITATION**

The Forensic Chemistry
Section, Toxicology and Seized
Drug Programs achieved **ISO 17025 accreditation** through
the ANSI National Accreditation
Board (ANAB) in January 2024.



## **LEAN ANALYSIS**

Secretary Melissa Magstadt performed a LEAN analysis of the Forensic Chemistry Section and identified several opportunities to enhance program administration, data sharing, and communication.

## **CLIENT OUTREACH**

Department of Health staff attended in-person conferences and meetings hosted by Unified Judicial Services and the South Dakota Defense Lawyers Association. In-person communication is also being planned with the South Dakota Sheriff's Association, Police Chief's Association, Department of Public Safety, and State's Attorney's Association.

## **WORKFLOW ENHANCEMENTS**

The Forensic Toxicology Program implemented workflow enhancements to reduce administrative burden on scientists allowing them more time each week to perform testing. Automation is also being used to enhance blood alcohol testing workflows.

## TURN-AROUND TIME IMPROVEMENT

Reduced turn-around time for blood alcohol testing is one of the most significant improvements from the past year. Beginning in early July 2024, toxicology staff worked diligently to implement efficiency improvements to achieve a 14-day turn-around time for blood alcohol testing.

Estimated Number of Tests Performed at the SPHL in FY24

52K
Chemistry
Lab

48K
Microbiology
Lab

18K
Forensics
Lab

The South Dakota Department of Health's **Epidemiology, Surveillance, and Informatics Center (ESIC)** is responsible for infectious disease investigations related to enteric, respiratory, vaccine-preventable, vectorborne, and zoonotic diseases. ESIC maintains and enhances our electronic disease surveillance system, ensures receipt of electronic data from hospitals, labs, and medical providers, and creates data visualizations such as maps and dashboards to make data more accessible. ESIC's mission is to improve the health and well-being of South Dakotans by monitoring disease, providing education, communicating timely, and collaborating with community partners to prevent disease.

## **American Indian Health Data Book**

South Dakota has the fourth largest American Indian population of any state, making up 11% of the population. ESIC's Tribal and Minority Health Epidemiologist coordinated the first-ever creation and dissemination of a new resource, the *American Indian Health Data Book*,



in January 2024. The health data book better highlights the health of American Indians living in South Dakota compared to the White population to aid understanding of the health behaviors, health outcomes, and the role the environment plays.

The South Dakota Department of Health releases health indicator data on a wide range of behaviors and outcomes at least annually. Due to the nature of how programs collect, analyze, disseminate, and act, the health indicators for a specific population group (e.g., by age group, sex, or race) are shared within a program's reports. The American Indian Health Data Book re-envisions data reporting to focus on the American Indian race group and weaving together the health indicators.

Health indicators in the Health Data Book include counts of infectious diseases, occurrence of and deaths from cancer, maternal and child health outcomes, occurrence and deaths from injuries, health behaviors among high school students and adults, and leading causes of death. A few insights from the data include:

- From 2016-2020, American Indian women had a 3-times higher cervical cancer incidence rate and a 1.5-times higher lung cancer incidence rate compared to White women.
- As the primary risk factor for lung cancer,
   43.2% of American Indians reported smoking
   cigarettes compared to 13.1% of Whites in 2021.
- Between 2012 and 2021, the infant mortality rate among American Indians was 4 to 5 times higher and the pregnancy-associated death rate was 4 times higher than among Whites.
- From 2012-2021, American Indian suicide death rates were 2.6 times higher than White death rates.

Work is ongoing to further delve into data from the Health Data Book or explore new data to enrich the understanding of health among South Dakota's American Indians.

## **SUCCESSES:**

- Both electronic and print copies of the American Indian Health Data Book have been distributed to Tribal leaders, healthcare leaders, and community partners.
- Feedback from key stakeholders has been positive and has included the use of the information contained in the health data book to raise awareness and apply for grant funding to support local activities aimed at closing the health gap.

## **EPIDEMIOLOGY**

**Child Lead Poisoning Prevention Program** (CLPPP) Campaign **Lethargy Lime** 

Lead is a naturally occurring element found in small amounts in the Earth's crust. It is a toxic metal that can be found in and around homes, in soil, and in some consumer products. ESIC's

## **Childhood Lead Poisoning Prevention Program (CLPPP)**

has been working since 2021 to raise awareness that lead is still a hazard in our environment, lead can cause learning and behavior problems in children, and our program coordinates care for children identified with lead in their blood.



One of the most important sources of lead South Dakota children are exposed to is leadbased paint in homes built before 1978. Approximately 50% of houses in South Dakota were built before 1980 so chipped or flaked paint in those homes is a risk to children when they eat or touch paint chips and flakes. The CLPPP worked with the **DOH Communications Team** and a media vendor to create an awareness campaign that focused Fashionable in '63. Health risk in '23.

on aging paint that is chipping, flaking, or peeling - which releases the lead.

The CLPPP convenes a Lead Advisory Group to inform and quide program efforts around awareness, testing, and care coordination. During the October 2024 meeting, advisory group members heard about the level of testing among children. Only 27.2% of children born during 2019 had received a test for lead by their third birthday, according to data reported to the CLPPP. Given the low rate of testing, the Lead Advisory Group voted unanimously to recommend universal testing of children at ages 12 months and 24 months.

## **SUCCESSES:**

- The CLPPP disseminated awareness messages using multiple communication channels including radio ads, billboards, social media, and our web page.
- The CLPPP established an educational curriculum for medical providers that addresses lead poisoning

prevention strategies, lead testing and medical management, reporting of blood lead results, and skills for educating patients and their families. Education was provided to 115 medical professionals and 55 students enrolled in medical training programs.

- The Lead Advisory Group recommended universal screening of children aged 12 and 24 months for lead in the blood. This recommendation takes effect January 1, 2025. The official quidance will be:
  - Universal testing of children at ages 12 months and 24 months.
  - Catch-up testing if a child does not have two blood lead tests by age 3 years.
  - Based on risk assessment questions, targeted testing every 6 months for children aged 6 months and older through age 2 years and once a year to age 6 years.



## **Key Priority 3: Public Health Educational Videos**

## **CHALLENGE**

Routine childhood vaccinations are one of the cornerstones of public health to enable people to lead healthy lives. Unfortunately, the latest data on vaccine coverage rates show decreasing rates for South Dakota children:

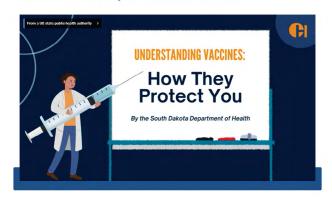
- ≥1 dose of MMR vaccine, that protects against measles, mumps, and rubella, among children aged 24 months decreased to 90.1% from 91.2% (comparing 2019 to 2020 birth cohort).
- 2-doses of MMR vaccine among children entering kindergarten decreased to 92.5% from 93.7% (comparing 2021 to 2022 school years).

### INTERVENTION

ESIC collaborated with the DOH Communications Team to create <u>public health educational videos</u>. The short 1-2 minute videos are designed to provide important tidbits of information to South Dakotans about important topics. The two videos related to vaccination include DOH's *What Happens When You Get Vaccinated* and CDC's *How Do Vaccines Help Babies Fight Infection?* 

### What Happens When You Get Vaccinated

Vaccines protect you and your community by preparing your immune system to fight diseases. Staying current with your vaccinations is essential for public health and personal safety. Ensure you get your vaccines and en



## **IMPACT**

The public health educational videos are available on the DOH website, and they have been included in some social media posts. The focus of adding these two videos to our webpage has been to raise awareness of the importance of routine childhood vaccines using short, fun videos.



## LEVERAGING TECHNOLOGY IN A SYPHILIS EPIDEMIC

The South Dakota Sexually Transmitted Infection (STI) Program Manager, **Kacee Redden-Benz**, was invited to speak at the 2024 National STI Prevention Conference on Sept. 17, 2024, in Atlanta, GA. Kacee participated in a panel titled "Extreme Data Makeover: Revolutionizing STI Surveillance with Modern Infrastructure," where she shared insights on South Dakota's innovative use of an asynchronous cloud-based algorithm, implemented since May 2023. This algorithm, the Syphilis Automated Records Search Algorithm developed by the CDC, and executed with ESIC, was introduced to alleviate the burden on Disease Intervention Specialists (DIS) and the STI Program, particularly regarding recurring titer follow-ups.

## **HEALTHCARE ACCESS**

The purpose of the **Division of Healthcare Access** is to provide and enhance access to timely, high-quality healthcare services while maintaining relevancy. The Division exists to expand rural emergency medical services via telehealth and other life-saving equipment, enhance recruitment and retention opportunities while proactively building a pipeline to the healthcare workforce, and effectively plan and prepare for public health threats to ensure individuals and families are well-informed. None of these can be done without using the latest information systems, technology, and communication strategies to ensure we provide excellent customer service and meet our customers where they are in their healthcare journey.

## **Optimal Readiness for Public Health Threats**

The Office of Public Health Preparedness and Response (PHPR) is essential to ensuring South Dakota is prepared to respond to public health emergencies. The office works to develop and maintain the relationships, infrastructure, and expertise necessary to effectively respond to public health threats. Through its key programs and collaborative efforts, PHPR plays a critical role in safeguarding the health and safety of residents across the state.

PHPR manages several vital programs to enhance the state's emergency preparedness capabilities. One of its primary initiatives is the **Public Health Emergency Preparedness Program**, which focuses on epidemiological and laboratory surveillance to track and identify emerging public health risks. This program provides the infrastructure and tools needed to coordinate and lead a rapid response to any public health emergency, from disease outbreaks to environmental hazards.

Additionally, the Healthcare Preparedness Program works closely with healthcare facilities across South Dakota to ensure they are equipped and ready to handle public health threats. This includes helping hospitals, clinics, and other healthcare providers enhance their preparedness plans, ensuring that healthcare systems can respond effectively when faced with a crisis.

## 2024 PREPAREDNESS AND READINESS INITIATIVES AND HIGHLIGHTS

In 2024, the state Office of Public Health Preparedness and Response was focused on strengthening its preparedness efforts through key events and exercises designed to enhance coordination and response capabilities across South Dakota.



- 2024 Preparedness Day: A training event designed for Department of Health leadership to review and update the department's emergency operations plan. This event focused on ensuring leaders are equipped with the knowledge and tools to manage a public health crisis effectively.
- Integrative Preparedness Planning Workshop:
  PHPR hosted a collaborative workshop with partner agencies across South Dakota. This workshop is designed to strengthen the state's preparedness planning through cross-agency coordination and the sharing of best practices for emergency response.
- Emerging Special Pathogen Exercise: In partnership with the National Emerging Special Pathogens Training and Education Center, PHPR

conducted an exercise to prepare for the identification, containment, and treatment of emerging pathogens, ensuring that South Dakota's healthcare and public health systems are prepared for complex public health threats.



FEMA Region 8
Preparedness
Directors Meeting:
PHPR hosted all
the preparedness
directors along with
federal partners, in
the Black Hills.

• Strategic Stockpile improvements: The Public Health Preparedness and Response team has made significant strides in restoring operations at the state's strategic stockpile warehouse to prepandemic levels. This effort has involved extensive reorganization and cleanup to ensure the warehouse is fully functional and ready for future emergencies. These strategic enhancements will not only streamline operations but also ensure the state is better prepared to respond to public health emergencies with a well-organized and accessible supply of critical resources.

Through these efforts, the Office of Public Health Preparedness and Response continues to strengthen South Dakota's ability to respond to public health emergencies. By fostering collaboration, providing critical training, and engaging with national experts, PHPR ensures that the state is well-prepared to protect its residents and manage emerging public health threats.

## **Employee Alert System**

A Workplace Safety Committee was developed to enhance the safety and well-being of all employees by developing, implementing, and overseeing safety initiatives and training. The committee's core objectives include creating location-specific safety policies based on the Sioux Falls model, developing comprehensive training programs for staff through SD TRAIN, and conducting annual safety drills across DOH locations, closely aligned with Continuity of Operations Planning (COOP).

The DOH has also invested in the safety and security of employees by purchasing and implementing an electronic notification system that will alert employees to potential threats, including inclement weather, and notify them of office closures or evacuations on their work and personal devices through a mobile application.

## **Pharmaceutical Shortages**



In 2024, the Department of Health has remained steadfast in its efforts to **mitigate the risk of critical drug shortages** and safeguard the health of South Dakotans. These efforts have been focused on exploring and implementing effective mitigation strategies to ensure the state is prepared to address potential shortages. One key initiative has been the management of a pharmaceutical stockpile in South Dakota, which will serve as a crucial resource in the event of drug supply disruptions. Additionally, the department has convened a drug shortage workgroup, tasked with acting on recommendations derived from a comprehensive pharmaceutical drug shortage risk assessment completed earlier this year. This proactive approach underscores the Department's commitment to protecting public health and ensuring continued access to essential medications for all residents of the state.

## **HEALTHCARE ACCESS**

## Strategic Analysis of Rural Healthcare: Addressing Access and Strengthening Systems

The Office of Rural Health (ORH) completed a comprehensive **Strategic Analysis of Rural Healthcare programs** in South Dakota to assess the state's rural healthcare access needs and evaluate the current state programming's ability to meet those needs. This five-step process highlighted key challenges and actionable solutions to enhance healthcare delivery in the state's rural areas.

The analysis began with an **Environmental Scan**, which established a foundation for more in-depth investigation. Through Data Analysis, the team examined provider supply and demand, healthcare access, and overall health patterns across rural areas. By analyzing these factors, they were able to identify key challenges and opportunities to improve service delivery in underserved regions.

To gain a deeper understanding of the issues facing rural healthcare, stakeholder interviews and focus groups were completed. Additionally, the team conducted **Leading Practice Identification** by interviewing national and international rural healthcare experts to uncover innovative solutions for improving rural healthcare delivery. These insights helped form a foundation for Recommendation Development, which produced evidence-based recommendations aimed at addressing the key challenges identified.

The **Strategic Analysis** uncovered four primary issues affecting rural healthcare access in South Dakota including higher poverty rates and health challenges, lack of formal collaboration, growing population of elderly residents, and workforce shortages.

By implementing recommendations to expand access to health services, strengthen strategic collaboration, and bolster the healthcare workforce pipeline; South Dakota can enhance healthcare access, improve health outcomes, and build a more resilient rural healthcare system capable of meeting the needs of its diverse populations.

## Supporting Rural Healthcare in South Dakota: Programs to Enhance Access and Workforce Development

South Dakota is committed to improving healthcare access in its rural communities through a variety of initiatives designed to attract and retain healthcare professionals. Programs that support this critical work in the office of rural health include but are not limited to: Recruitment Assistance Program, Rural Healthcare Facility Recruitment Assistance Program, State Loan Repayment Program, and National Health Service Corps (NHSC) programs. These programs provide financial incentives and support for individuals who choose to practice in underserved areas, helping to bridge the healthcare gap in rural parts of the state.



To build the future healthcare workforce and ensure a steady pipeline of healthcare professionals, South Dakota also offers Healthcare Career Camps (Scrubs camps and Camp Med events). These educational camps are designed for high school students to explore careers in healthcare.

## Office of Rural Health Community Engagement





The Office of Rural Health has begun a tour of visits to our Critical Access Hospital, and Rural Health Clinic Partners. The goal of the visits is to build relationships, learn more about our partners and what is important to them, and inform them about the programs the Office of Rural Health offers.

In 2024, the Office of Rural Health (ORH) made a concerted effort to engage directly with communities across South Dakota by **visiting partner healthcare facilities** throughout the state. The ORH team conducted on site meetings with Critical Access Hospitals, Federally Qualified Health Centers, Rural Health Clinics, and Institutes of Higher Education. These face-to-face meetings

provided valuable opportunities for the ORH team to connect with rural healthcare professionals, who continue to be essential in providing high-quality care to South Dakotans in remote areas. This outreach reinforced the department's commitment to supporting and strengthening rural healthcare and recognizing the dedicated healthcare heroes serving these communities.

## **Healthcare Workforce Communications**

In 2024, the Office of Rural Health partnered with communications to launch a robust campaign aimed at highlighting the Department of Health's programs designed to support the healthcare workforce in rural and underserved communities. The campaign spotlighted initiatives that provide essential resources, training, and incentives to strengthen healthcare services in these areas. By showcasing programs that address workforce challenges and promote the retention and recruitment of healthcare professionals, the campaign helped raise awareness of the DOH's ongoing efforts to ensure all South Dakotans have access to quality care, no matter where they live.



## **EMS Recruitment Effort Targets DOH Staff**

In the last quarter of 2024, the Department of Health provided a first time opportunity available to DOH staff by offering up to 30 staff members to complete training to become a licensed Emergency Medical Technician (EMT) as part of our recruitment strategies for emergency medical personnel.

Acceptance into the training will be on a first come, first-served basis.

## EMT TRAINING OVERVIEW AND WHAT TO EXPECT:

- Class Hours: 160 -180 hours of classroom instruction, including several practical skill sessions. This is a commitment!
- Hybrid Learning: Many EMT classes are transitioning to a hybrid approach, blending online learning with hands-on training. Specific locations for these sessions will be coordinated to ensure comprehensive hands-on learning experiences.
- Clinicals and Hands-On Training: Focuses on patient assessment, oxygen administration, patient immobilization, splinting, administration of Naloxone, and more. The hands-on portion reinforces classroom learning and teaches stepby-step patient care, interventions, and safety.

## **TRAINING COSTS:**

- This is available to no more than 30 DOH employees.
- DOH will provide funding assistance for up to 2 attempts of



the National Registry of Emergency Medial Technicians (NREMT) exam.

- Cost for testing after the two attempts will be on the individual.
- This EMT Course follows the National Highway Traffic Safety Administration and NREMT education standards.

## **Statewide Trauma System of Care and Annual Conference**

The State Trauma System hosts an **annual trauma conference** bringing together surgeons, physicians, registered nurses, and EMS professionals from around the state. The 2024 conference was a milestone event with **160 individuals attending** and 47 of the 49 designated trauma centers were represented. This was the largest and most successful trauma conference to date. Presentations ranged from identifying opportunities for improvement in trauma care, statewide updates, injury prevention, motor vehicle accidents and drug trends, disaster and mass casualty, treatment for rural trauma patients, pediatric readiness, and case review sessions.

A continued success of the trauma system includes active engagement from each of the 49 trauma centers during quarterly regional performance improvement reviews. The trauma registry serves as a central database collecting trauma data from the trauma facilities.



Each of the four regions review trauma cases entered in the state's trauma registry. Cases meeting specific criteria are evaluated with surgeon leadership leading each review. Inclusive to the review process includes physicians, registered nurses, and EMS professionals involved with the case. Outcome results provide an opportunity for system growth and ongoing development.



## **Stroke System of Care**

On October 9, 2024, the American Heart Association/American Stroke Association announced a statewide commitment of \$5 million for its **Mission: Lifeline Stroke** initiative to strengthen the full spectrum of stroke care across South Dakota. The foundation of this new initiative is a nearly \$4.4 million grant from The Leona M. and Harry B. Helmsley Charitable Trust.



When it comes to stroke, every second counts. My vision has been to provide the same high-quality stroke care throughout our entire healthcare system in South Dakota - whether you come into our larger, more urban hospitals or a smaller critical access hospital. With this collaboration and large-scale investment before us, we will truly be able to improve stroke prevention and patient outcomes across our state.

Secretary Melissa Magstadt



Mission: Lifeline Stroke focuses on connecting all components of acute stroke care into a smoothly integrated system that reinforces the use of evidence-based guidelines to timely and effectively treat stroke patients. It brings together hospitals, emergency medical services and first responders, rehabilitation facilities, communications and regulatory agencies, and state and local government to forge a proactive system of stroke care that saves and improves lives.

## Naloxone for Business: Everyone has the power to save a life

The Department of Health has had a longstanding partnership with the Department of Social Services on



providing Naloxone training and statewide distribution through federal grant dollars. What started in 2017 with an aim of supporting emergency services grew exponentially to present day. At its conception, EMS, law enforcement, and fire departments were provided training and Naloxone at no cost. Since then, the program has expanded its reach to include the public-school systems, post-secondary institutions, court systems, rehabilitation centers, and tribal entities statewide.

- To date, the Naloxone Project has provided over 12,000 boxes of Naloxone.
- Data collected by EMS responses indicate 39 percent of patients who receive Naloxone have an improved condition post administration.

## **HEALTHCARE ACCESS**

## \$20 Million Investment into Emergency Medical Services

## **TELEMEDICINE IN MOTION (\$1.7 MILLION)**

**Telemedicine in Motion** connects physician and nurse medical professionals with first responders in the field improving efficiencies in patient assessment, treatment, and transfer to definitive care centers. This initiative supported tablets for EMS providers, training, telehealth service including unlimited data, software, professional support service, and project implementation. On November 14, 2024, the DOH and Avel eCare EMS proudly celebrated two years of the Telemedicine in Motion program, which has transformed Emergency Medical Services (EMS) in 107 communities statewide.



When we first started Telemedicine in Motion, we knew there was a real need to bridge healthcare gaps, especially for people in our more rural communities. But it's been so inspiring to see how this initiative has grown and how it's changing lives. As of today, there are 104 live sites and 3 additional sites in-progress across the state. Telemedicine in Motion has had 1,482 activations, each one a meaningful step toward better access to care.

Secretary Melissa Magstadt



## LIFEPAK 15 REPLACEMENT MONITORS (\$11.6 MILLION)

The LIFEPAK initiative provided **308 LIFEPAK street ready monitors** to participating ambulance services statewide that included training, distribution, implementation and installation, and full data support. This initiative assists EMS personnel in caring for critical patients experiencing heart-related illnesses allowing for EKG (the patient's heart rhythm) to be transmitted to the receiving facility

allowing hospital staff sufficient time to prepare for the patient. What's more, is that the Eagle Butte and Pine Ridge ambulance services were two tribal agencies that received updated equipment (as part of the replacement effort) through a participation agreement mutually agreed upon by Indian Health Services (IHS) and the state.

## **REGIONAL SERVICE DESIGNATION ASSESSMENT (\$8 MILLION)**

Understanding the current ambulance system and identifying the strengths and improvement opportunities was essential in this initiative. A key objective is an **ambulance response time of 30 minutes or less** to any resident or visitor who calls 9-1-1. Several key findings and best management practices were identified and shared with key stakeholders. Throughout 2024, the Department of Health executed a grant program with approximately \$7.5 million to distribute.

 Applicants had to be knowledgeable in the Regional Services Designation (RSD) report findings and incorporate components of the report into their grant application.



 Applicants had to provide specific, measurable, attainable, realistic, relevant, and time-bound solutions for improving long-term sustainability of EMS in South Dakota.

## **HEALTHCARE ACCESS**

 Examples of activities or projects that could be awarded funding include but are not limited to regional training or management hubs, supply procurement systems, contractor assessment of local services and delivery, and billing software solutions.

The first grant funding opportunity opened January 16 and closed March 15, 2024. Round one webinars were held: January 22, January 24, January 31, February 6, and February 20. A total of \$1.6 million was obligated to 39 grant recipients or service providers.

The second grant funding opportunity opened August 1 and was initially set to close September

30, 2024. However, the deadline was extended to October 21, 2024, to garner more interest, education, and awareness during upcoming events like the grant writing symposium DOH hosted on October 1-2 in Mitchell. Round two webinars were held: August 7, August 21, September 3, and September 16. In addition, on September 26, DOH hosted a webinar for tribal service providers that included Rosebud, Standing Rock, Crow Creek, Cheyenne River, and Pine Ridge nations.

Funding award announcements were distributed at the end of November to over 60 EMS services and private organizations totaling approximately \$5.8 million.

## Transition of Basic Life Support Professionals from Department to Board of Medical and Osteopathic Examiners

During the 2024 legislative session, three bills about Emergency Medical Services moved through the legislative process, were signed by Governor Noem, and became law effective July 1, 2024.

The bills, their titles, and a brief description are below.

- **SB63** An Act to revise provisions related to the licensure and regulation of ambulance services.
- SB64 An Act to revise provisions related to the regulation of emergency medical services and associated personnel.
- SB87 An Act to revise provisions related to the State Board of Medical and Osteopathic Examiners and its appointed professional councils.

The bills transferred oversight of approximately 2,300 Emergency Medical Responders (EMR) and Emergency Medical Technicians (EMT) from under the Office of EMS and Trauma within the Department of Health to the South Dakota Board of Medical and Osteopathic Examiners. This transition also included initial education and Continuing Medical Education (CME) and the formation of an EMS Council.

Following the legislative session, the Department and board staff began transition planning meetings. Certification, CME, and education records were transferred successfully, and regularly scheduled meetings assured a seamless transition.

In addition, both teams hosted recurring transition meetings with the EMS industry. These joint meetings included EMS service leadership, EMS professionals, and key stakeholders who participated in information sessions allowing for question-and-answer opportunities. Three town-hall style meetings also took place where department leadership presented, including Cabinet Secretary Melissa Magstadt.

This transition was a significant change for EMS providers and required extensive communications among the department, the board, and the South Dakota EMS and Ambulance Associations. Webinar recordings, frequently asked questions, and several published articles were available online at <a href="mailto:ems.sd.gov">ems.sd.gov</a> throughout the transition.

## South Dakota Health Link: Better Communication. Better Care.

South Dakota Health Link is a multi-state Health Information Exchange (HIE) with the core foundation to improve care and coordinate information sharing.



South Dakota Health Link allows medical information to be shared between medical professionals through a secure platform to improve the quality, safety, and efficiency of care provided. The network lets providers access real-time clinical histories and customizable notifications to facilitate better care through more complete information. Health Link provides several services to deliver timely information when caring for patients, clinical event notifications, and population health and analytic tools.

The network consists of 69 hospitals, 450+ primary care, and other ancillary provider organizations across six states covering more than 95,000 square miles.

South Dakota Health Link also provides access to end users within Indian Health Services and tribal health locations to the Point of Care Exchange (clinical access) as well as Event Notifications (alerts).

## **Tribal Participant Locations include:**

- Chevenne River in Eagle Butte
- Great Plains Tribal Leaders Health Board
- Rosebud Indian Health Services
- Pine Ridge Service Unit
- South Dakota Urban Indian Health
- Woodrow Wilson Keeble Memorial Health Care Center
- Fort Thompson Service Unit
- Lower Brule Health Center



## **2024 HEALTH LINK HIGHLIGHTS**

- Onboarded 14 new member organizations.
- Convened the Advisory Council quarterly meetings to update and enhance the strategic planning roadmap.
- 10th Annual Fall Forum (pictured above) was held in October in Sioux Falls with over 100 attendees, 16 speakers, and 18 vendors.
- Health Link Migration is currently underway and began in the last quarter of 2024 to transform and enhance the system's Direct Secure Messaging, Point of Care Exchange, Cloud based storage, and Electronic Master Patient Index.





## **FEEDING SD SERVICE PROJECT**

The Offices of Chronic Disease Prevention and Health Promotion, Community Engagement, and Injury, Violence, and Overdose Prevention came together for a meaningful service opportunity with Feeding South Dakota. In just one day, staff and contractors packed an impressive 1,365 boxes of food—equivalent to 27 pallets—helping to support communities in need across the state!

## IT Strategic Planning Advancements: Data Modernization as the Cornerstone

The department has made significant progress in advancing the *IT Strategic Plan*, emphasizing a coordinated approach to modernizing information and technology infrastructure. Central to this effort is the *IT Steering Committee*, which has established itself as a cornerstone for planning, oversight, and alignment of IT investments with departmental goals. Through a structured framework for evaluating systems, this committee has fostered collaboration across IT, data, and programmatic objectives.

## IT STRATEGIC PLAN ADVANCEMENTS

- Comprehensive IT Systems Inventory: Completed an inventory of IT assets to identify systems for updates, replacements, or retirement, ensuring alignment with evolving needs.
- IT Workforce Assessment: Identified skill gaps and informed hiring strategies to address workforce challenges and support modernization efforts.

## DATA MODERNIZATION ACHIEVEMENTS

- Workforce Acceleration Initiative Award: Secured three CDC Foundation-funded positions to address IT workforce gaps and enhance modernization efforts.
- Public Health Infrastructure Grant (PHIG) – DOH Data Atlas: Developed and secured funding for a proposed unified, public-facing health data platform.
- PHIG Implementation Center: Engaged national partners on integrating the Trusted Exchange Framework and Common Agreement into South Dakota Health Link to enable secure, interoperable data exchange, improving connectivity and patient care statewide.

## FORWARD FOCUS ON DATA GOVERNANCE

A cornerstone of the IT Strategic Plan is the development of a data governance framework to formalize and enhance data management practices while promoting interoperability across programs. These initial and ongoing efforts aim to strengthen the security, quality, and accessibility of public health data throughout the department.

## **Key Data Governance Objectives:**

- Improved Data Access and Sharing
   Policies: Establish streamlined agreements to enhance collaboration within the department and external stakeholders.
- Enhanced Data Privacy: Strengthen privacy measures, like HIPAA or other regulatory standards, to safeguard sensitive health information and enable data sharing.
- Data Quality Standards: Develop guidelines to improve the reliability and integrity of health data across critical programs.
- Centralized Data Inventory: Create an inventory of data assets to support transparency and provide a foundation for modernization.

These achievements highlight the department's dedication to optimizing its IT environment and enhancing public health impact through innovation and modernization.

## **Overview of Communication Strategies and Media Campaigns**

The South Dakota Department of Health's Communications Team led impactful campaigns this year to enhance public awareness, engagement, and health education across diverse topics. Using targeted social media strategies and localized outreach, we reached key audiences throughout South Dakota.

## **EMS AWARENESS**

Aimed at younger generations, this campaign promoted the work and volunteerism of EMTs and paramedics through



testimonials on Instagram, Facebook, and LinkedIn. We also created a coloring book for kids during EMS Week, fostering early awareness of emergency services.

## **SUICIDE PREVENTION**

Focused on South
Dakota counties
with higher suicide
rates and statewide
outreach during Suicide
Prevention Month, this
campaign delivered
ads on Facebook,
Instagram, Snapchat,
and in local newspapers.



Community engagement was further supported by distributing branded items to increase visibility.

## **SCRUBS CAMP**

To encourage healthcare careers, our Scrubs Camp campaign used social media ads, customizable flyers, and on-site media capture to promote events across South Dakota. The effort aimed to boost student registrations and foster community involvement.

## **OUR PROGRAMS, YOUR SUCCESS**

In collaboration with the Office of Rural Health, this campaign showcased individual successes within Rural Health Programs. Testimonials were shared on Instagram, Facebook, and LinkedIn, spotlighting the positive impact of these programs.

## **FACES OF PUBLIC HEALTH**

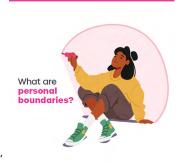
This campaign highlighted the day-to-day experiences of public health staff through video testimonials, offering the public a view of careers within the Department. Currently featuring Licensure and



Certification, it will expand to include more roles.

## **COR HEALTH + WELLBEING**

Targeting youth, young adults, and parents, this ongoing campaign provided mental health resources and adolescent health information across Facebook, Instagram, and Snapchat. The content focused on mental health, suicide prevention,



healthy relationships, and adolescent wellness.

## MATERNAL AND CHILD HEALTH NEEDS ASSESSMENT

Through ads on social media and in local communities, this campaign encouraged participation in conversations around maternal and child health, helping to inform future health initiatives and reach diverse populations, including tribal areas.

Each of these campaigns reflects our team's commitment to data-driven communication strategies and utilizing a mix of media channels and community-oriented approaches to effectively connect with South Dakotans and foster healthier, more informed communities.

## **HEALTHCARE ACCESS**

## **MEDIA RELATIONS TRAINING**

In May and June 2024, the DOH's Communications Team delivered an in-depth **media relations training program** to equip department leaders with essential skills for engaging with the media effectively. This training, part of the Department's ongoing commitment to transparency and public trust, emphasized the importance of positive media interactions in supporting the Department's mission.

The sessions focused on developing proactive communication strategies, maintaining clear and consistent messaging, and confidently managing interviews. Participants explored how media relations impact public perception, learning techniques for tailoring messages to diverse audiences, and controlling narratives during interviews. Key topics included the importance of timely responses, fostering positive relationships with journalists, and understanding the media landscape across print, broadcast, and digital platforms.

A highlight of the training was a hands-on roleplaying exercise, where participants practiced handling real-life scenarios, such as natural disasters and public health crises. In these breakout sessions, attendees worked together to craft talking points, address potential challenges, and deliver mock press briefings. This immersive exercise reinforced the skills needed to communicate under pressure, enabling staff to provide the public with timely, accurate, and empathetic information during emergencies.

The training concluded with a group discussion, where participants shared insights and feedback, reinforcing the critical role of effective media relations in enhancing the Department's reputation and public service. This program marks an important step in strengthening the Department's commitment to open communication and responsive leadership.

## INTERN CONTRIBUTIONS

Taylee Stroup, our Marketing & Communications Intern, contributed significantly to multiple projects across communication platforms,



campaigns, and events. She supported the development and distribution of the Health Highlights and Healthcare Workforce Newsletters as part of our centralized communications efforts, alongside assisting with the communications plan for the intranet reorganization. Her role in campaign coordination included attending meetings with vendors like Epicosity, Lawrence & Schiller, Insight, and Sampson House, where she learned about media approval processes and RFP procedures. Taylee offered insights for campaigns aimed at collegeaged audiences, including collaboration with DSS on the Avoid Opioid campaign. In social media content development, she researched and created posts for the DOH's Facebook, Instagram, and LinkedIn accounts, scheduled posts via Hootsuite, and collaborated with the Department of Agriculture and Natural Resources on hemp research.

Her involvement in the Healthcare Revolution Workforce Summit included helping to set up the event's website on Whova, managing content updates, posting regularly on social media, and monitoring attendee and exhibitor participation. Taylee also handled various communication tasks, such as drafting press releases, managing staff requests through the communications work order request, updating the DOH website, and networking with state and marketing agency staff. Additionally, she designed a new certificate for the SD QuitLine and wrote one-pagers for various DOH initiatives, gaining hands-on experience in the behind-the-scenes work essential to effective communication and marketing.

## DOH ROADSHOW DOH ROADSHOW





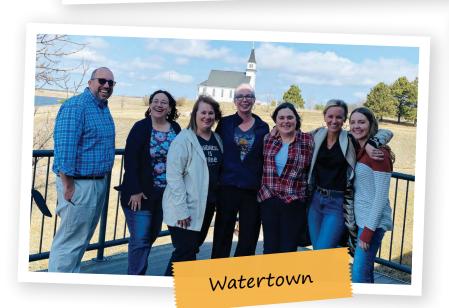


















## FAMILY & COMMUNITY HEALTH

The mission statement of the **Division of Family and Community Health** is to design, implement, and administer a network of health services, education, and prevention programs to aid the residents of South Dakota to develop and maintain a healthier lifestyle and achieve the highest possible quality of life. The division underwent a leadership restructure in 2024 and now accomplishes its mission under three deputy division directors and nine offices: the Office of Disease Prevention Services (ODPS), the Office of Chronic Disease Prevention and Health Promotion (OCDPHP), the Office of Injury, Violence, & Overdose Prevention (OIVOP), the Office of Community Engagement (OCE), the Office of Public Health Nursing Services (OPHNS), the Office of Lifespan Health (OLH), the Office of Maternal & Child Health Data, Analytics, & Insights (OMCHD), the Office of Home Visiting (OHV), and the Office of Family Nutrition Services (OFNS). Staff across the division work collaboratively with each other, healthcare professionals, and community partners across the state to strategically implement programs and initiatives that reduce disease prevalence and positively impact overall health and wellness of South Dakotans. Our division has an annual budget of \$67M and employs 197.5 FTE, with 79% of our budget coming from federal grant funding. Family and Community Health has accomplished an extraordinary amount of progress and success throughout 2024, as outlined below.

## Office of Public Health Nursing Services

With a focus on immunizations, school health, and pregnancy care, the **Office of Public Health Nursing Services** has achieved remarkable results in 2024.

## **IMMUNIZATIONS**

Public Health Nurses administered over 1,700 additional immunizations in the first year of restructuring compared to the previous year, marking a 19% increase. This success is attributed to enhanced record reviews, client outreach, and the introduction of automated reminders via a new texting platform. Additionally, the department expanded its reach by offering state employee flu clinics and community-based vaccination events.



The **2024 employee flu vaccination** started strong, with a **60% increase** in vaccinations given compared to the previous year. The addition of the Primary Health System allows for electronic scheduling, improves operation efficiency, and eliminates paper records and data entry as it connects directly with the South Dakota Immunization Information System.

## **SCHOOL HEALTH**

Public Health Nurses dedicated **1,723 hours** to delivering health screenings and education to students across the state. In the 2024-2025 school year, Public Health Nurses are offering the *Teen Outreach Program (TOP)* in 12 classes, which has been positively received by students and schools. The TOP curriculum is a positive youth development program designed to build teens' educational success, life and leadership skills, and healthy behaviors and relationships. As a result, teens can better navigate challenges during their teenage years.

## **PREGNANCY CARE**

The <u>Pregnancy Care Program</u> has enhanced support for pregnant and postpartum women by introducing the *Partners for a Healthy Baby* curriculum, developed by an interdisciplinary team at Florida State University. This research-based, evidence-informed curriculum equips nurses with a wide range of educational tools, rooted in the latest clinical and developmental research, to address prenatal health, parenting, infant mental health, and

## **FAMILY & COMMUNITY HEALTH**

family stability. Additionally, South Dakota Medicaid's launch of the BabyReady Program has strengthened care coordination across the state, providing comprehensive support for expectant families.

## MATERNAL HEALTH INNOVATION GRANT

For the first time, DOH received funding from the State Maternal Health Innovation (MHI) Program through the Health Resources and Services Administration (HRSA). This funding aims to improve maternal health care, support statewide maternal health task forces, and enhance maternal health outcomes across South Dakota.

The Maternal Health Innovation (MHI) grant supports the South Dakota Maternal Health Innovation Program (SDMHIP) in addressing critical barriers to maternal care in underserved areas, including rural and frontier regions designated as maternity care deserts. Through innovative solutions such as telehealth services, mobile health units, and community-based care models, we are expanding access to high-quality maternal health services.

Public health nurses, bolstered by grant-funded training and workforce development initiatives, play a vital role in delivering localized care. They provide

case management, address social determinants of health, and ensure maternal care is accessible—even in areas where healthcare facilities are hours away. By strengthening infrastructure and workforce capacity, the MHI grant empowers the SDMHIP to bring culturally responsive maternal care closer to home for South Dakota's mothers and families.

A key initiative under the grant is the establishment of a Severe Maternal Morbidity Surveillance System (SMMS). This system will collect and analyze comprehensive data on maternal health outcomes. Insights from this data will guide program strategies, driving measurable improvements in maternal health outcomes statewide.

The Maternal Health Task Force (MHTF) serves as a collaborative platform for healthcare providers, public health professionals, community organizations, and other stakeholders. Together, they will design and implement evidence-based strategies to improve care continuity, address disparities, and promote cultural competency in maternal health. Public health nurses will play a central role in these efforts, bridging gaps by delivering direct services and coordinating care in underserved communities.

## Office of Lifespan Health

## **NEWBORN SCREENING PROGRAM**

The South Dakota Newborn Screening Program achieved significant milestones in 2024 to improve the health and well-being of newborns across the state.

**Expanded Screening Panel:** In June, X-linked adrenoleukodystrophy (X-ALD) was added to South Dakota's Newborn Screening Panel. Additionally, a new rule was enacted requiring newborn hearing screening for all babies born in the state. These additions enable earlier detection, which can save lives and support healthy development.

HRSA Co-Propel Grant: In July, the program received a four-year HRSA Co-Propel grant to modernize and enhance its operations. This grant funds the addition of a program epidemiologist and the development of an updated information system.

These advancements will improve data collection, analysis, and public information sharing, ensuring better outcomes for South Dakota's newborns.

## **PREVENTION SERVICES**

The Office of Lifespan Health (OLH) met goals in 2024 through the support of the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (ERASE MM) grant provided by the CDC. This vital funding enabled OLH to implement strategic prevention initiatives aimed at reducing maternal mortality rates and improving maternal and infant health outcomes across South Dakota.

One of the most impactful initiatives was the **Fatherhood Webinar Series**, developed in collaboration with the Center for the Prevention of Child Maltreatment (CPCM). This series emphasized

the critical role fathers play in the family dynamic and in preventing maternal and infant mortality. The program successfully broadened awareness statewide, attracting participation from community partners and receiving favorable feedback throughout the department. It highlighted the importance of shared responsibility in promoting maternal health and positioned fatherhood as an essential element of maternal and infant well-being.

OLH also established a meaningful partnership with the **South Dakota Doulas Association** to strengthen the support system for expectant mothers. Through this collaboration, OLH funded scholarships for 20 prospective doulas, who were recruited and trained by Childbirth Professionals International, an accredited organization for doula certification. Scholarship recipients completed their Birth and Postpartum Doula Certification training and received ongoing support to become South Dakota Medicaid providers. Follow-up visits, continued education, and access to resources ensured these doulas were well-prepared to contribute to improved maternal care and outcomes statewide.

#### **SD PLAN**

In April 2024, the South Dakota Department of Health, as a grantee of the Title X Family Planning



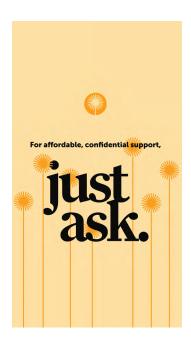
Services Grant, launched its rebranded program, South Dakota PLAN. Previously known as South Dakota Family Planning, this rebranding reflects DOH's dedication to providing accessible, comprehensive, and inclusive healthcare services for all South Dakotans.

**SD PLAN**, which stands for **Prepare**, **Learn**, **Advocate**, **and Navigate**, reinforces the Department's commitment to offering judgment-free, confidential care and empowering individuals to make informed decisions about their futures. Services provided through SD PLAN include:

- Contraceptive counseling and methods
- Physical exams for men and women
- Screenings for sexually transmitted infections (STIs) and HIV

- Pregnancy testing and counseling
- Basic infertility services
- Breast and cervical cancer screenings

SD PLAN operates across South Dakota through seven full-service clinics and one Community Health Office. In 2023, SD PLAN locations served 3,753 clients, helping them prioritize their reproductive health and wellness.



A cornerstone of SD PLAN's mission is to ensure affordability and accessibility for all. By utilizing a sliding fee scale, the program removes financial barriers, ensuring that individuals—regardless of income—can access the care they need.

For more information, visit <u>JustAskPlan.com</u>.

#### PINE RIDGE SAFE SLEEP COLLABORATION

Oglala Lakota County has the highest rate of infant deaths in South Dakota, with unsafe sleeping spaces identified as a major contributing factor through the *Child Death Review*.

To address this critical issue, the Maternal and Child Health (MCH) program has partnered with Pine Ridge IHS and the Tribal Health team to improve access to safe sleep solutions. In addition to distributing pack 'n plays through the community health office in Pine Ridge, the collaboration ensures that pack 'n plays are provided to families during their appointments at these partner locations.

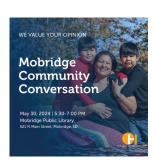
This partnership expands access to safe sleep spaces for infants across Oglala Lakota County, helping to protect the youngest and most vulnerable members of the community.

# Office of Maternal & Child Health Data, Analytics & Insights

# ADDRESSING COMMUNITY HEALTH NEEDS THROUGH TITLE V NEEDS ASSESSMENT AND SURVEY ANALYSIS

In 2024, the Title V Maternal and Child Health (MCH) Program conducted a comprehensive statewide needs assessment to identify the health priorities and challenges faced by South Dakota's women, infants, children, adolescents, and children with special healthcare needs.

The program partnered with a consultant to develop a robust needs assessment survey and facilitated community and partner conversations statewide. Community conversations focused on gathering



insights from rural communities to understand their unique health challenges. Partner conversations, held in Sioux Falls, Pierre, and Rapid City, engaged professionals and organizations to assess the state's capacity to address maternal and child health needs.

Throughout the spring and early summer, the survey was widely promoted online and at conferences and local events, with staff across the division collaborating to encourage participation. This outreach ensured a broad spectrum of voices contributed to shaping the assessment.

The Office of Maternal and Child Health Data Analytics and Insights conducted a detailed analysis of the survey data. This essential survey, conducted every five years, provides actionable insights into the pressing health needs of families in South Dakota. The findings will guide resource allocation, inform program priorities, and drive service improvements statewide.

#### Key areas identified include:

- Promoting healthy relationships for adolescents
- Expanding access to prenatal and postpartum care
- Enhancing services for children with special healthcare needs

These insights have already begun shaping targeted health initiatives that align with the Department of Health's mission to enhance the well-being of South Dakotans. The needs assessment lays a strong foundation for future health strategies, ensuring today's efforts will positively impact the next generation.

# IMPROVING MATERNAL AND CHILD HEALTH THROUGH ACCESSIBLE PRAMS DATA INSIGHTS

The PRAMS (Pregnancy Risk Assessment Monitoring System) team recently released a comprehensive analysis of South Dakota's 2017-2021 survey data. This survey gathers vital information from new mothers about their experiences before, during, and after pregnancy, providing a valuable window into the health trends affecting South Dakota's mothers and infants. By presenting the data in a clear, accessible format, the PRAMS team aims to engage community members, healthcare providers, and policymakers alike in understanding and addressing the state's maternal and child health needs.

Key findings shared in the report include a decline in the percentage of mothers living below the federal poverty level, from 30.3% in 2020 to 26.6% in 2021, alongside emerging health challenges, such as increased rates of maternal depression and gestational diabetes. The PRAMS team's efforts to make these insights publicly available empower stakeholders and community members to see how public health initiatives are shaping outcomes, while also highlighting areas where further support may be needed—such as expanded mental health resources for expectant mothers. By making this data accessible to all, the PRAMS team ensures that the survey's insights reach a broader audience, helping to drive community engagement and support for health improvements. This work aligns with the Department of Health's mission to enhance wellbeing across South Dakota, supporting a healthier future for mothers, infants, and families statewide.

# Office of Home Visiting

In 2024, programs providing support through home visiting to pregnant women, infants, and children were restructured into the **Office of Home Visiting (OHV)**. The Office oversees the Bright Start nurse home visiting program and partners implementing the Families First program using the Parents as Teachers evidence-based model. The OHV hosted the first annual All Home Visiting Statewide Meeting in February, which included Bright Start, Families First, and Tribal Home Visiting program partners. Program leadership and the Families First team participated in an on-site federal Maternal Infant and Early Childhood (MIECHV) grant monitoring visit and met all programmatic and fiscal requirements of the grant. In January 2024, the OHV Epidemiologist and Continuous Quality Improvement (CQI) Coordinator were selected to present at the MIECHV All Grantee Meeting on South Dakota's success in "Innovative Partnerships to Support Data Use for CQI". These activities highlight the OHV's strong commitment to delivering high-quality services to South Dakota families.

#### **BRIGHT START HOME VISITING**

The Bright Start Home Visiting Program seeks to improve pregnancy outcomes, child health and development, and



to build and support early childhood systems. The Bright Start program implements the Nurse Family Partnership (NFP) evidence-based model and services that meet the needs of families who do not meet NFP model requirements. Bright Start offers home visits from trained nurses who provide support and guidance on healthcare, parenting, child development, and accessing community resources. The nurses also conduct screenings and offer referrals for maternal and child health services. Services are available statewide.

#### 2024 Highlights

- Services in the southeast region were expanded by adding two additional nurse home visitors.
- In SFY24, support was provided to 664 mothers and 519 infants and toddlers.

1,183
Estimated # of
Bright Start Home
Visiting Program
Clients in
2024

- A total of 6,846 nurse home visitor encounters were completed with families.
- 94.2% of infants and toddlers had received the most recent well-child visit recommended by the American Academy of Pediatrics, based on their age.

#### PARENTS AS TEACHERS HOME VISITING

Home visiting services using the evidence-based Parents as Teachers (PAT) home visiting model were expanded in 2024. Families First, implemented by Black Hills Special Services Cooperative (BHSSC), expanded services to include Pennington County with two new home visitors. This expansion increased their service delivery area to include Butte, Fall River, Lawrence, and Pennington Counties, with a total of five home visitors now serving the region. Home visiting services are open to families with children from birth to kindergarten entry. Families First parent educators assist parents in fostering nurturing relationships, promoting optimal child development, and helping them achieve their family goals.

#### 2024 Highlights Include:

- The program completed its first year of service delivery, including 347 home visits.
- A total of 41 households and 61 children were newly enrolled in the program.
- The program successfully achieved 18 out of the 21 PAT Essential Requirements.
- The transition to the new data system, Visit Tracker, was completed.

In November 2024, the Office of Home Visiting awarded Children's Home Society of South Dakota the opportunity to implement the <u>Parents as Teachers (PAT)</u> home visiting model, with two home visitors serving Minnehaha County. Program planning is currently underway, with service delivery expected to begin in Spring 2025.

# Office of Family Nutrition Services

In 2024, the **Office of Family Nutrition Services (OFNS)** was created as part of a broader restructuring effort to strengthen the state's public health infrastructure. As part of this effort, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program staffing is shifting to a more dietitian and public health assistant-centered workforce, ensuring clients receive expert nutrition support while aligning with other WIC state models. This change not only allows WIC to continue serving women, infants, and children but also expands its role to adopt a broader focus on public health prevention, ultimately enhancing long-term health outcomes for families across the state. The shift emphasizes a move from clinical-based services to a more comprehensive case management approach, addressing the full spectrum of family nutrition and wellness needs.

# COMMUNITY INNOVATION AND OUTREACH PROJECT (WIC CIAO)

The Center for the Prevention of Child Maltreatment (CPCM), a center at the University of South Dakota, was awarded a \$1 million grant to implement the WIC Community Innovation and Outreach Project (WIC CIAO).

Through this funding opportunity, outreach efforts were conducted across the Sioux Falls community, including more than 36 outreach events. Over 4,800 outreach materials were distributed, and more than 2,500 individuals were engaged.

Community partners brought valuable expertise, local knowledge, and trusted relationships, enabling the WIC-CIAO Project to effectively engage with diverse communities. These collaborations expanded the project's reach, helping to identify service gaps, tailor outreach efforts to address local needs, and develop innovative solutions that resonated with the community.

#### **TRAINING SERIES**

In 2024, the WIC Program launched a **comprehensive training series** in partnership with CPCM, aimed at enhancing staff skills in cultural competency and trauma-informed care. Funded in part by the USDA's Food and Nutrition Services, these impactful training sessions were designed to empower staff with the knowledge and practices necessary for effective, compassionate engagement with diverse communities and individuals affected by trauma.

#### 2024 Highlights:

• Cultural Competency series provided an in-depth exploration of cultural topics to promote understanding and effective engagement.

• Trauma-Informed

Care series focused on equipping staff to recognize and respond to trauma's impact, fostering a supportive environment for WIC participants.

Together these series exemplified the WIC Program's commitment to professional growth, enhancing staff capacity to provide culturally competent and trauma-informed care, and ultimately delivering person-centered, compassionate services to participants.

# WELLNESS ON WHEELS (WOW) MOBILE VANS

The Department of Health launched the **WOW mobile vans**, strategically located across the state to bring health services to underserved communities. To date, 59 staff members have completed comprehensive training, including an online module for mobile operations and an in-person driver training course hosted by the Highway Patrol, ensuring that all staff can operate the van safely.



 The program has participated in outreach events such as state employee flu clinics (pictured below), parades, pow-wows, and vendor fairs, with two Memorandums of Understanding (MOUs) signed to provide services on partner properties, further strengthening community impact.



 A dedicated Wellness on Wheels web page was created, featuring a contact form for potential collaborators and a public-facing event calendar to help residents access services.

As we look forward to expanding this program, Wellness on Wheels is paving the way for accessible services, ensuring that all South Dakotans can benefit from our programs, no matter where they live.

# WEBSITE REDESIGN AND OUTREACH IMPACT (JULY-OCTOBER 2024)

Between July and October 2024, the revamped WIC website experienced impressive growth, attracting 23,281 visitors, with 23,007 being new users. This surge in traffic highlighted the successful re-launch and the effectiveness of targeted improvements aimed at enhancing user experience and engagement.

#### 2024 Highlights:

- The OFNS focused on user-friendly navigation, ensuring that visitors could easily find essential information.
- Communication was streamlined by adding an interactive online form that allows participants to easily report shopping issues, request

- appointments, or file complaints, providing a more efficient and convenient way to connect with the WIC program without the need for phone calls or in-person visits.
- To better serve our partners, including vendors and healthcare providers, OFNS created dedicated pages that provide centralized access to key information, brochures, and forms, with the vendor page being accessed 432 times, showing active use of these resources.



The new website is more than just a resource; it's a bridge to the next generation. By providing instant access to essential health and nutrition information, we are empowering a younger, tech-savvy audience to find the support they need without the barriers of phone calls or in-person visits.

The interactive form allows participants to quickly request appointments, report issues, or file complaints—conveniently and digitally. This streamlined approach is particularly appealing to those accustomed to handling tasks online.

Additionally, the easy-to-navigate *Approved Foods* section eliminates the need for physical pamphlets or phone calls, providing participants with up-to-date digital solutions for their shopping needs.

By meeting participants where they are—online—we are not only enhancing service delivery today but also fostering a future of health awareness and accessibility that will benefit families for years to come.

# Office of Disease Prevention Services

# HEALTHCARE-ASSOCIATED INFECTIONS AND ANTIMICROBIAL STEWARDSHIP

The HAI/AR program aims to enhance patient safety in South Dakota by reducing healthcare-associated infections (HAIs) and combating antimicrobial resistance (AMR) through proactive infection control initiatives. Key activities include conducting Infection Control Risk Assessments (ICARs), providing technical assistance, education, and training, as well as collaborating with key stakeholders and partners throughout the state.

Providing critical infection prevention training and resources to frontline healthcare workers statewide was guided by insights from a needs assessment completed during the COVID pandemic, which received over 1,900 responses. The program has conducted 72 training sessions, reaching more than 17,000 individuals. In response to the needs assessment, the HAI program began Infection Control Assessment and Response (ICAR) assessments in 131 healthcare facilities, including acute and critical access hospitals, long-term care facilities, dialysis units, and ambulatory care centers. These assessments resulted in over 4,788 tailored recommendations based on CDC's infection prevention modules.

Project Firstline (PFL) education was delivered in partnership to 28 facilities. PFL educates workers about local HAI threats, focusing on transmission prevention and identifying at-risk populations. Long-term care facilities have received the most recommendations, often addressing interconnected issues across infection control practices. In 2023-2024, South Dakota nursing homes saw a significant increase in noncompliance citations, resulting in fines totaling over \$70,000. Contributing factors include staff turnover, limited knowledge of infection control practices, NHSN access, and frequent system updates.

**Collaboration & Partnerships:** The HAI program engaged with national and local organizations, including the CDC HAI Program, CDC Dialysis Coalition, SD Healthcare Association, and the newly

formed Association for Professionals in Infection Control and Epidemiology (APIC SD) South Dakota Chapter, to strengthen infection prevention efforts. The launch of the SD APIC chapter in 2023 provides networking and educational opportunities for infection preventionists (IPs), including quarterly webinars and an annual conference. South Dakota now has 43 certified infection preventionists, with 16 specializing in long-term care—an increase from 24 in 2023.

66

We just had our survey at our nursing home and we did not have any infection control tags or concerns and I just wanted to say thank you for bringing Project Firstline out and coming to share your knowledge and educating our leaders, staff, and myself! It really does make a difference when the information is coming from someone other than me all the time. Thanks again!

- JULIE, RN



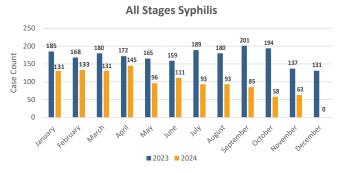
A state-focused Multidrug-Resistant Organisms prevention plan, developed with CDC input, supports education and technical guidance in these settings. Prevention efforts in South Dakota continue to evolve with antibiotic stewardship initiatives. Approximately 80% of South Dakota's hospitals have met the CDC's 7 Core Elements. The state will enhance efforts in 2025 to provide education and technical assistance for antibiotic stewardship, including participation in Antibiotic Awareness Week (November 18–24, 2024) with gubernatorial support.

**Future Impact:** The HAI/AR project has substantially improved infection control practices, reduced infections, and enhanced antibiotic stewardship across South Dakota. Through continued collaboration, education, and technical support, the project is poised to further strengthen healthcare safety and outcomes in the state.

#### SEXUALLY TRANSMITTED INFECTIONS

South Dakota aims to be a place where Sexually Transmitted Infections (STI) are prevented and where every person has quality STI prevention, care, and treatment. The Office of Disease Prevention Services (ODPS) in collaboration with the South Dakota Public Health Lab and other statewide partners are addressing the underlying factors contributing to the high rates of syphilis in our state and leveraging new rapid test technologies to raise awareness, provide timely testing and treatment, and ultimately decrease the prevalence of syphilis among the population we serve to keep them healthy and strong.

In 2024, ODPS collaborated with various agencies including IHS, tribes, homeless shelters, treatment facilities and jails to increase awareness of STI risks, provide immediate identification and treatment of cases, and improve access to testing services through community outreach events. Collaboration with these agencies led to increased access to education and testing by 58% over the past several years. Additionally, five agencies, including University of South Dakota Frontier and Rural Medicine Program students serving inmates at the Winner Jail, Midwest Street Medicine, Monument Health in Spearfish, Pennington County Jail, and South Dakota Department of Corrections, signed Memorandum of Agreements with ODPS this year to utilize the new rapid testing and ensure a closed-loop process for clients to receive treatment promptly.



According to current data, the Department of Health has seen a downward trend of all stages of syphilis (Early and Congenital) from 2023 to 2024. There has been a 46% decrease in cases since 2023. Over the last two years, we have increased the number of testing

and educational events and participated in 52 events just this year, which is a 18.9% increase from 2023.

For continuous awareness, the STI Program hosts monthly meetings with community partners to provide quarterly reports on syphilis data and to share the progress in decreasing the prevalence of syphilis in South Dakota.

#### **NOTABLE ACCOMPLISHMENTS**

In result of the increased testing, ODPS incorporated innovative technologies to improve the management of case workflows in South Dakota. In May 2023 South Dakota STI Program was the first of three states to implement the Syphilis Automated Records **Search Algorithm**, developed by CDC, to reduce the burden of follow-up on re-occurring titer checks due to the lifespan of syphilis in the body. Since implementing this cloud-based processing system, South Dakota has been able to decrease the workload by successfully closing out 39% of cases as nonpriority follow-up titer checks. ODPS STI Program presented at the 2024 National STI Prevention Conference on Extreme Data Makeover: Revolutionizing STI Surveillance with Modern Infrastructure and provided insight on the utilization of a cloud-based algorithm. This model has garnered interest from other state representatives looking to improve their own syphilis response strategies.

Amanda Holland and DeAnna Harber, Disease Intervention Specialists (DIS).

teamed up with the Standing Rock Community Health Representative (CHR) program for a



health fair and STI testing event. Twenty individuals received health education, including information on STIs/HIV. The CHRs provided rapid syphilis testing, and confirmatory testing was done by the DOH. Although attendance was low, the DIS team gathered additional information on other cases, including a suspected pregnancy. The CHRs assisted by visiting the client's home, where it was discovered that she

was 5-6 months pregnant without prenatal care. The DIS team intervened by educating the client and facilitating testing and treatment at IHS. They scheduled a follow-up appointment and partnered with IHS to offer incentives for the client and her partner to complete the necessary doses to prevent congenital syphilis. Thanks to the collaboration with the Tribe and IHS, they are working to prevent a congenital syphilis case and ensure the client receives the prenatal care she needs.

Staff from the Southeast Region DOH Office of Disease Prevention, Wagner IHS, and GPTEC held a **three-day STI testing event in Wagner, Lake Andes, and Marty** from June 25-27th. They screened around 125 people for syphilis, 100 for Hepatitis C, gonorrhea, and chlamydia, and 65 for HIV. Four

individuals were treated for syphilis, including one who had been hard to locate since September 2023. Nine potential new Hepatitis



C cases were referred for follow-up at Wagner IHS. GPTEC distributed incentive gift cards. This successful event doubled the number of tests from the previous one. Another event that included STI testing, flu and COVID vaccines, and other health promotions took place in Wagner and Yankton Sioux Tribal communities.

# Office of Chronic Disease Prevention & Health Promotion

#### **IMMUNIZATION DASHBOARDS**

Vaccination dashboards offer the public an accessible way to track South Dakota's vaccination efforts. They feature clear, easy-to-read charts and graphs, along with deeper analytical tools for those interested in more detailed data. These dashboards help keep the community informed about how well the state is performing in its vaccination programs and allow for data-driven decisions to improve public health.

In 2024, the Immunization Program launched a new Influenza Vaccination Dashboard, aimed at providing the public with real-time data on the current influenza season. This dashboard compares current vaccination rates with those from the previous season, helping to assess progress and trends. It uses data from the South Dakota Immunization Information System (SDIIS) to show the number of influenza doses administered, as well as detailed information by county, age group, and sex.

A <u>Childhood Vaccination Dashboard</u>, focusing on vaccination coverage for children at 24 months of age, is also available. Future plans include the

creation of dashboards for Adolescent Vaccination and Adult Vaccination. These data resources join the **School Vaccination Dashboard**, which has been available for the past three years, and offers another valuable resource for understanding immunization rates in schools across the state.

# CARDIAC READY COMMUNITIES

The Cardiac Ready Community (CRC)



Program focuses on evaluating and improving community readiness for cardiac events while raising awareness about cardiovascular disease prevention. The designation process involves thorough evaluations, strategic planning, and the development of new awareness and cardiovascular prevention programs. Key initiatives include CPR and Automated External Defibrillator (AED) training, as well as providing the community with critical information regarding the location of AEDs. DOH, in partnership with the South Dakota Foundation for Medical Care, oversees this program, which aligns with the American Heart Association's "chain of survival,"

emphasizing six essential steps to enhance the chances of survival for those experiencing sudden cardiac events.



As of November 2024, Plankinton, Iroquois, Newell, Mitchell, DeSmet, and Kimball have achieved Cardiac Ready Community designation, with Viborg, Vermillion, and Rapid City having signed letters of intent to become designated. A Cardiac Ready Campus program is also being piloted with the University of South Dakota.

#### **HEALTHY BRAIN PROGRAM**

The Department received CDC funding to implement the BOLD Public Health Program to Address Alzheimer's Disease and Related Dementias (ADRD). In February 2024, a program coordinator was onboarded to lead the Healthy Brain Program in South Dakota. This funding will be used to create a strong public health infrastructure with a focus on issues such as dementia risk reduction, early detection and diagnosis, prevention of avoidable hospitalizations, and caregiver support.

A diverse coalition has been established to develop a strategic plan to address ADRD. Coalition members participated in a two-day strategic planning session and will meet regularly to discuss strategies and resources. The plan is under development in close partnership with the SD Department of Human Services and the Alzheimer's Association, SD Chapter. Workgroups will be established to identify partners and specific action steps for the implementation phase, which begins in October 2025.

#### **SD QUITLINE**

The South Dakota Quitline offers up to 12 weeks of personalized phone coaching with up to 12 weeks of cessation



medication (Bupropion or Varenicline) with a doctor's prescription or up to 12 weeks of Nicotine Replacement Therapy (RNT) (gum, lozenge, or patch) all free to South Dakotans ready to quit using tobacco ages 13 and older. In FY23 the **Quitline** received a total of **4,117** direct calls, with **2,904** tobacco users receiving services.

The SD Quitline continues to exceed national standards for quit rate, ranking in the top three in the nation, highlighting the effectiveness of the services offered.

The Kickstart Kit allows enrollees to select either two or four weeks NRT (patch, gum, or lozenge) and a self-help quit guide sent directly to their home. Since launching the Kickstart Kit in 2017, the SD QuitLine has sent out **12.177 Kickstart Kits**.

In January 2024, the SD QuitLine started offering **2QuitSD** as another service to help with a tobacco cessation journey. The **2QuitSD text program** offers limited coaching calls and up to eight weeks of



NRT medication (gum, lozenge, or patch) only. The limited calls occur at the start and midpoint of the program. Since January 1, 2024, there have been 442 enrollments to the new service (data collected from January 1, 2024- October 31, 2024). In the first six months of the program, enrollees were more likely to be female (62.3%) and between 25 and 44 years old (52.5%), with the most common type of insurance being Medicaid (32.2%) with more than 10% of enrollees reporting no insurance coverage.

#### **TOBACCO PREVENTION**

The SD TCP partnered with Emory Centers for Public Health Training and Technical Assistance to develop a *Youth Tobacco Prevention Toolkit*. The toolkit was designed for all adults who work with youth, whether it be in an afterschool program, school, or another organization. Its purpose is to help provide an easy-to-use guide in teaching youth about tobacco products, the impacts of using tobacco products, curriculums that can help youth learn, activities youth can do themselves and implement in their own environments with other peers, and much more. The toolkit went live in September 2024 and can be found on the Tobacco Control Program's website at <a href="https://quittobaccosd.com/resources/youth-tobacco-prevention-toolkit">https://quittobaccosd.com/resources/youth-tobacco-prevention-toolkit</a>.

In partnership with the toolkit, the SD TCP staff assembled a new one-day training to be offered statewide. The training is tailored to middle and high school students who are wanting to learn more about tobacco control and how to educate their peers and communities on the impact tobacco can have on all of us. Throughout this training students learn about the dangers of using tobacco products (including e-cigarettes and newer products), how to educate others, and how to advocate for change in their schools and communities. Attendees of the trainings have mainly consisted of school districts and staff of youth organizations/clubs.

# SD BREAST & CERVICAL CANCER EARLY DETECTION PROGRAM

The All Women Count! (AWC!) Program provides breast and cervical cancer screening and diagnostic services to uninsured and underinsured South Dakota women aged 30-64 with a family



income at or below 250% Federal Poverty Level. The program partners with over 200 healthcare facilities across the state to provide clinical services to eligible women. In FY24, the program screened over 1,500 women for breast and/or cervical cancer, with 29% of those served identifying as Hispanic – up from 25% in FY23. The program now offers visit forms in English,

↑ 1,500 Estimated # of Breast & Cervical Cancer Program Screenings in 2024

Spanish, Karen, and Nepali. The <u>Breast</u>

<u>Cancer Dashboard</u> was updated with new data, and a <u>cervical cancer monograph</u> was created and shared with partners across the state.

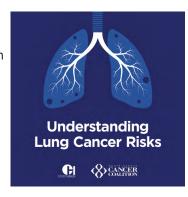
#### **SD COLORECTAL CANCER PROGRAM**

Funded under the CDC, the program is focused on increasing colorectal cancer screening among men and women aged 45-75. The SD Colorectal Cancer Program partners with clinics that serve individuals with lower incomes and where fewer than 60% of patients are up-to-date on screening. As the program enters year five of the current cooperative agreement with CDC, they are partnering with five health systems (Sanford, Avera, Falls Community Health, Horizon Health Care, and SD Urban Indian Health) to use and strengthen strategies that have been shown to increase colorectal cancer screening within 14 clinic sites in South Dakota. The program collected 2023 clinic-level screening data from all participating clinic sites, showing an 11.63% increase in colorectal cancer screening from baseline.

# COMPREHENSIVE CANCER CONTROL PROGRAM

The Comprehensive Cancer Control Program released a request for application (RFA) seeking applications that support the **2021-2025 SD Cancer Plan**, focus on evidence-based intervention implementation, promote equitable and accessible cancer prevention, early detection, and cancer survivorship efforts in South Dakota. Three applications were submitted, and the review committee chose all three vendors to partner with in FY25 (June 1, 2024 – May 31, 2025). Sanford Health is implementing evidence-based interventions to increase HPV vaccination rates at 25 Family Medicine Clinics and 10 Pediatric Clinics in South Dakota. Immunize SD is sending client reminders and

offering professional education to increase HPV vaccination rate in the eight SD counties with the lowest vaccination rates. Mobridge Regional Hospital & Clinics are implementing evidence-based



interventions to increase HPV vaccination rates as well as breast, cervical, and colorectal cancer screening rates. In addition, the **Comprehensive Cancer Control Program** is partnering with Sanford Children's Hospital and Voices against Cancer to expand pediatric cancer survivorship support networks within the state. Two data dashboards were updated and shared with members of the SD Cancer Coalition as well as other partners across the state: Interactive SD Cancer Plan and Data Dashboard and Lung Cancer Dashboard.

#### SOUTH DAKOTA CANCER REGISTRY

The South Dakota Cancer Registry (SDCR) achieved gold certification from the North American Association of Central Cancer Registries (NAACCR) and national recognition from CDC's National Program of Cancer Registries (NPCR) as a Registry of Distinction for the 2023 Call for Data. The NAACCR certification measures were for data completeness, quality, and timeliness. In addition to this certification, South Dakota cancer data was published in the Cancer in North America **2017-2021** report and is available on the Cancer in North America CiNA Volumes web page. The NPCR recognition measures excellence in the areas of completeness of case ascertainment, accuracy of data, and timeliness. In conjunction with this recognition, the high-quality cancer data is included in CDC's incidence and mortality statistics, United **States Cancer Statistics** 

# Office of Injury, Violence, & Overdose Prevention

#### **INJURY PREVENTION WEB PAGE**

The Department of Health's <u>Injury Prevention</u> <u>web page</u> provides resources, reports, and data on preventing various injuries, including those related to violent deaths, falls, alcohol-related deaths, traumatic brain injuries, and overdoses.

# SOUTH DAKOTA VIOLENT DEATH REPORTING SYSTEM (SD-VDRS)

The South Dakota Violent Death Reporting System (SD-VDRS) is an anonymous surveillance



system that collects information on violent deaths in South Dakota. The findings of SD-VDRS are used to support prevention strategies, including disseminating useful and actionable data to guide and improve local, state, and national prevention policies, programs, and practices. The SD-VDRS

program completed the third year of statewide data collection from violent deaths in 2022. For this data year, the SD-VDRS program received high rankings in most case initiation and informative descriptive data performance indicators. The SD-VDRS program can improve on the collection of circumstance information related to violent deaths. To improve data quality and performance, the SD-VDRS program completed three regional coroner trainings, which included a presentation on data quality. The SD-VDRS program continues to make data sharing a priority by making data available on the DOH's **SD-VDRS** web page as well as providing data presentations to all nine South Dakota tribes, law enforcement agencies, and emergency medical service providers. Two SD-VDRS Advisory Committee meetings were held to share program activities and identify additional data sharing partnerships.

# STATEWIDE SUICIDE PREVENTION EFFORTS

DOH facilitates an active Statewide Suicide Prevention Workgroup that includes executive level leadership from multiple state agencies and meets quarterly to ensure collaboration, monitor progress, and prioritize strategies. A separate sub-

workgroup with



agency representatives, as well as statewide partners, meets monthly to ensure implementation of the *South Dakota Suicide Prevention State Plan*. In the last year the workgroup has been able to develop and update several data resources, including infographics and data dashboards, coordinate statewide trainings and conferences, develop, and disseminate means safety resources, and assist in updating the *2025-2030 Suicide Prevention State Plan*, which will be finalized by January 2025.

As part of the statewide suicide prevention efforts, an inter-agency Data to Action group meets monthly to review provisional data to identify communities experiencing high rates of suicide deaths



and suicide ideation. When a high-risk community is identified, workgroup members proactively reach out to healthcare, behavioral health, local organizations, schools, and other partners in that community to make them aware of the changes in data and provide additional support and resources. The *Suicide Prevention County Ads Campaign* was implemented to raise awareness through targeted digital advertising in the counties of Fall River, Hughes, Lawrence, Lincoln, Meade, and Pennington.

### GOVERNOR'S CHALLENGE TO REDUCE SUICIDE AMONG SERVICE MEMBERS, VETERANS, AND THEIR FAMILIES (SMVF)

In late 2023, South Dakota signed on to the *Governor's Challenge to Reduce Suicide Among Service Members, Veterans, and their Families*, an initiative led by the Substance Abuse and Mental Health Services Administration and the United States Department of Veterans Affairs. A Governor's



Challenge group was brought together that included representatives from the SD Departments of Social Services, Health, Tribal Relations, and Veterans Affairs, as well as other veteran-serving organizations. After attending the Governor's Challenge Implementation Academy in February 2024, three strategies were identified and integrated into the *South Dakota Suicide Prevention State Plan*.

- 1. Identify SMVF and screen for suicide risk,
- 2. Promote connectedness and improve care transitions, and
- 3. Increase lethal means and safety planning.

Through an appropriation from the 2023 Legislative Session, the DOH received funds to contract with three organizations to provide Suicide prevention and postvention programs. Contracts are in place with the following organizations:

Lost&Found - Lost&Found's (L&F) mission is to deliver comprehensive, data-driven, and resilience-focused suicide prevention and postvention programs and services for youth, young adults, and their support networks. L&F has a Peer2Peer Mentoring program implemented in 10 post-secondary institutions. Peer2Peer Mentoring program helps mentors and mentees become familiar with support services available on campus and in the community, so the resources are more likely to be used by students when needed. L&F conducted a Campus Resilience Index (CRI) in five

campuses to address the suicide prevention capacity of the campuses and their communities, identify areas of strength in prevention, and recommend programs, policies, or resources that can reduce suicide risk. L&F offers Peer2Peer and the CRI to all South Dakota post-secondary institutions.

Mountain Plains Evaluation, LLC - Mountain Plains Evaluation, LLC provides research and evaluation services for health and human service programs at the local, state, and national levels. They provide support to the Office of Injury, Violence, and Overdose Prevention by assisting with community mental health and suicide prevention data services. In 2024, Mountain Plains Evaluation developed a Suicide Prevention Capacity Needs Assessment to explore relevant suicide and suicide risk-related data to guide in enhancing and expanding suicide prevention capacity statewide.

Helpline Center - The Helpline Center offers a wide range of suicide prevention and postvention support services throughout the state including the 24/7 operated 988 Suicide and Crisis Lifeline. The Helpline Center is focused on capacity building and program implementation within the K-12 system. Helpline Center implemented the evidence-based peer-topeer support program, Hope Squad, in 11 South Dakota K-12 schools and has plans to implement the program in 14 additional K-12 schools. The Hope Squad is a peer-to-peer suicide prevention program where members are nominated by their classmates as trustworthy peers and trained by advisors to reduce the risk of youth suicide through peer intervention. In 2024, the Helpline Center developed a K-12 comprehensive suicide postvention toolkit focused on suicide loss response planning. They are currently working on implementing the toolkit into five K-12 schools in South Dakota.

#### **OVERDOSE PREVENTION EFFORTS**

In 2024, the Opioid program collected and disseminated data on suspected drug overdoses and drug overdose deaths. County-specific data reports have been distributed to local communities to inform them of increases in drug overdoses and to identify ways to assist them with resources. Regional data

reports have been created, in partnership with the Department of Public Safety Fusion Center, and sent to all local law enforcement agencies across the state.

Through a partnership with the DOH opioid program, the South Dakota Association of Healthcare Organizations continues to engage in provider education, focusing on topics such as reducing stigma around Opioid Use Disorder (OUD), identifying and diagnosing OUD, referral to treatment, and access and utilization of the Prescription Drug Monitoring Program. SD Association of Healthcare Organizations (SDAHO) has expanded beyond the technical assistance they provide for the emergency department toolkit. They have branched out to other facilities and clinics after seeing success with providing individualized tools to help providers implement new practices into their workflow.

In 2024, public awareness research efforts were taken to understand the opioid crisis through the perspectives



of industry experts and individuals with lived experience to test awareness and perceptions of the Avoid Opioid social media campaign, examine the effectiveness of opioid prevention messaging and creative executions, and identify key factors to be leveraged in future marketing and message development. As a result, a new brand and transition plan was adopted, taking the public awareness efforts from the Avoid Opioid platform to a new Let's Be Clear brand - clear about safety, support, and getting help; clear about myths and misinformation; and working together to spark moments of clarity, start open conversations, and be free of stigmas around substance use. Let's Be Clear launched in November 2024 with a media strategy that encompasses four primary goals:

- Education: Provide education and understanding behind opioid misuse and opioid use disorder.
- **2. Stigma Reduction:** Create awareness of substance misuse by changing the narrative.

- **3. Share Resources:** Show the full array of resources available.
- **4. Provide Direct Support:** Connect our audiences with what to do to get help.

The DOH Opioid program continued to partner with the South Dakota Health Link and Avera Behavioral Health System to implement the Navigator program that provides coordination of services by being a point of contact for patients in the behavioral health system as well as providers across the system who may need assistance in directing their patients to behavioral health services. The Navigator program has hosted multiple community education sessions on mental health, substance use, and how to navigate the behavioral health system. The enhanced referral system receives referrals from hospitals, emergency

departments, and individuals to help link patients to the appropriate level of care. The Navigator program has hosted trainings to teach professionals to utilize the South Dakota Health Link to connect providers to electronic health information from other providers to improve continuity of care among providers.

DOH established new partnerships with five Community Health Worker organizations to provide overdose prevention education, naloxone availability information, and linkages to treatment and recovery resources in their communities to individuals with OUD and their families. This project includes organizations that serve people who are homeless, justice-involved youth, and people who present in a healthcare setting.

# Office of Community Engagement

#### **COMMUNITY HEALTH WORKERS**

To date, there are currently 250 community health workers (CHW) and community health representatives (CHR) in South Dakota, and 125 who have gone through the certification process. Having CHWs and CHRs go through the certification process helps organizations with applying and receiving reimbursement through SD Medicaid. Since March 2023, 21 organizations across South Dakota have received over \$343,500 in reimbursement from SD Medicaid. The Department of Health continues to offer scholarships for organizations that are crosstraining staff as CHWs or are beginning a new CHW program within their organization. Since January 2024, DOH has approved over 15 individuals for scholarships to attend an approved training program at Lake Area Technical College or Southeast Technical College. The CHW profession in South Dakota continues to grow and CHWs/CHRs are located across the state in community-based organizations, healthcare organizations, non-profits, and tribal entities.

#### TRIBAL RELATIONS

The Office of Community Engagement hosts monthly Zoom calls with each of the nine Tribes in South Dakota with representatives from both Tribal Health Departments and Indian Health Services (IHS). During each call, DOH staff have meaningful conversations with Tribal partners to discuss staffing updates, programmatic and outreach efforts, successes, challenges, and upcoming events. DOH staff then share ongoing programmatic updates, new data and tracking information, funding opportunities, conference and training information, general outreach, and resource connection. These calls have strengthened the relationship between the SD DOH and Tribal partners over the past year and have particularly increased the opportunities to collaborate on STI testing, treatment, contact tracing efforts, epidemiology and data updates, opioid and suicide prevention efforts, and more!



Corryn Gabbert, Community Engagement Coordinator for SD DOH, and Nicole Schneider, Senior Policy Analyst for Department of Tribal Relations, attended the Flandreau Santee Sioux Tribe's Health Center's 30th Annual Health Fair.

In September 2024, the Flandreau Santee Sioux Tribal Health Department held their 30th Annual Health Fair. The Flandreau Tribal Health Team invited representatives from DOH's Office of Community Engagement and the SD Department of Tribal Relations (DTR) to attend and have a booth at the event. During the health fair, DOH and DTR staff interacted with over 120 attendees and shared information about various chronic disease programs and health promotion efforts.

#### **COMMUNITIES THAT CARE**

The Department of Health has partnered with the University of Washington Center for Communities That Care (CTC) to implement the CTC Framework and Prevention Model in communities across the state. This evidence-based approach uses prevention science to guide communities through a proven fivephase change process. The CTC model promotes healthy youth development, improves outcomes, and reduces problem behaviors by addressing risk and protective factors within communities.

CTC is a coalition-based prevention system developed by the Center for Substance Abuse Prevention (CSAP), a division of the Substance Abuse and Mental Health Services Administration (SAMHSA). It employs a public health approach to prevent youth issues such as violence, delinquency, school dropout, and substance abuse. Through strategic consultation, training, and research-based tools, CTC empowers community stakeholders and decision-makers to implement programs that foster healthy youth development and effectively address their community's unique challenges.

In 2024, South Dakota funded seven communities to implement the CTC framework: Brookings, Custer, Fall River County, Mitchell, Sioux Falls-Urban Indian Health, Wagner, and White River. These communities are supported by two specialized coaches from the Western Prevention Resource Center (Youth and Family Services) in Rapid City and the Northeast Prevention Resource Center in Watertown. These coaches assist communities in executing the CTC phases and provide additional support in prevention education and program implementation.

This collaborative effort underscores the Department's commitment to improving youth outcomes and building healthier communities statewide.

#### BABBEL LANGUAGE LEARNING SERVICES

The Department of Health serves a diverse population across the state, reflecting a broad range of linguistic needs. In 2022, approximately **7.4%** of South Dakota's population aged five years and older (62,860 people) spoke a language other than English. Addressing the challenges posed by language barriers is crucial for effective communication, equitable service delivery, and fostering trust within these communities.

To tackle these challenges, SD DOH launched the Babbel Language Learning Program in July 2024, providing 38 employees with access to comprehensive language training. This initiative aims to improve communication skills, enhance cultural competence, and strengthen relationships between staff and non-English-speaking or limited-Englishproficiency populations. By equipping employees with these critical skills, the Department seeks to ensure equitable and efficient public health services while maximizing employee effectiveness in their roles.

The program's impact extends beyond language acquisition, influencing day-to-day activities and fostering stronger connections with diverse communities. Feedback is collected quarterly to assess user experiences, with a **year-end proficiency evaluation** scheduled for **July 2025** to measure progress and inform future improvements.

This initiative reflects the DOH's commitment to reducing barriers, improving health equity, and creating a culturally responsive public health workforce.

# NEXUS SD: CONNECTING CARE ACROSS SOUTH DAKOTA

Nexus SD is a **statewide collaboration** of healthcare, human services, and social



Connecting People. Driving Outcomes.

service providers utilizing an integrated technology platform and referral system to coordinate whole-person care. The network is united by a shared vision: to streamline connections between multi-sector providers, address social needs, and drive positive outcomes for populations that are underserved or at higher risk.

The initiative launched with **12 pilot organizations** in Mitchell and Rapid City in March 2024, **expanding to statewide enrollment in June 2024**, with additional organizations joining the network. Onboarding for Nexus SD is ongoing, and a complete list of participating members can be found at <u>nexus.sd.gov</u>.

Two versions of Nexus SD are available for use. The first portal is used by members. It provides several screening tools that can be utilized to help assess seeker (individual seeking assistance) needs, contains an extensive resource directory of local, regional, and national services, offers a comprehensive social care history for each seeker, and allows multiple organizations to collaborate on care for individuals as well as share service outcomes.

The second portal can be accessed by the public at nexus.sd.gov. It contains all the same resources and tools as the member version and allows individuals to self-serve by searching for resources anonymously for themselves or their friends and family. Public users can request referrals through the platform or create a profile if they choose. Both sites have translation capabilities with over 100 languages available.

# DEPARTMENT OF HEALTH AND MEDICAID PRESENT TOGETHER AT THE SOUTH DAKOTA PERINATAL ASSOCIATION CONFERENCE



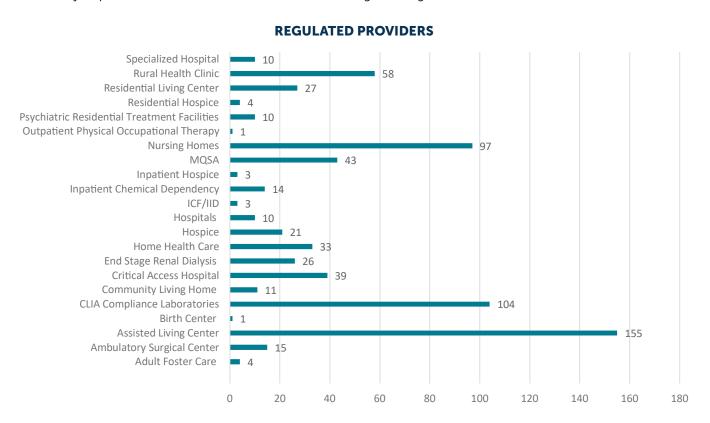
Valerie Kelly, Shannon Munchow, and Carrie Churchill.

Carrie Churchill, Administrator for the Office of Home Visiting, Shannon Muchow, Public Health Nursing Manager, and Valerie Kelly, Medicaid Pregnancy Program Manager, jointly presented at the **South Dakota Perinatal Annual Conference** in Sioux Falls on Sept. 17, 2024. They highlighted the successful collaboration between the Department of Health and the Department of Social Services that led to the launch of the Medicaid Pregnancy Program in April 2024. Their presentation provided an in-depth overview of the Medicaid program, as well as the DOH Pregnancy Care and Home Visiting Programs.

The mission of the **Division of Licensure and Accreditation** is protecting and promoting the health and well-being of South Dakota citizens by surveying and licensing healthcare facilities; protecting the public from sanitation and safety hazards by inspecting and licensing food services, lodging establishments, and campgrounds; operating the state's medical cannabis program ensuring an accessible, safe and responsible program; maintaining the state's vital records data including birth, death, marriage and divorce records; overseeing the collection and quality of that data and overseeing the evaluation and dissemination of our state's health data; and spearheading our agency work regarding accreditation and continuous quality improvement.

# Office of Licensure & Certification

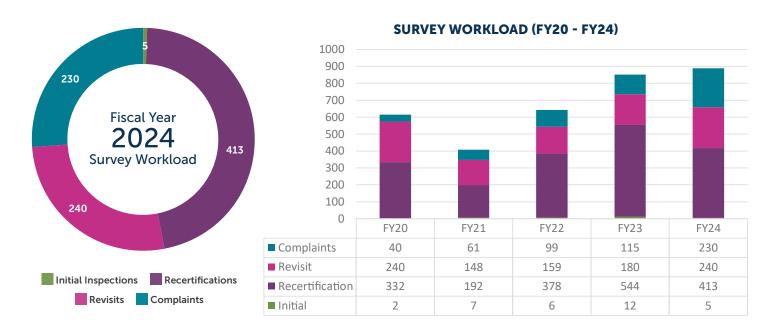
The Department of Health's **Office of Licensure and Certification (OLC)** is responsible for ensuring the health and safety of patients and residents in South Dakota through the regulation and licensure of healthcare facilities.



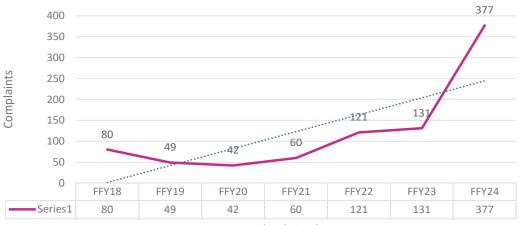
\*Excludes 695 radiology providers and CLIA Accredited, PPM, COW, and VA Laboratories

#### ACCOMPLISHED WORKLOAD

1. Despite challenges related to an increasingly demanding workload and limited resources, OLC's dedicated staff conducted 888 federal and state surveys in FY24. OLC has experienced a marked increase in complaints and facility-reported incidents (FRIs). From FFY18 to FFY24, there has been a 371.25% increase in complaints, resulting in onsite surveys, and a 187.7% increase from FFY23 to FFY24.



#### **COMPLAINTS RESULTING IN ONSITE SURVEYS**



Federal Fiscal Year

# ENHANCING TRANSPARENCY FOR CONSUMERS IN HEALTHCARE

The Department of Health began posting survey inspection reports for healthcare providers in August 2024. This effort was to ensure transparency and help families and consumers make



informed decisions regarding the care and placement of their loved ones. All provider survey inspection

reports from July 2023 to current final reports are available on the DOH website at <a href="https://doh.sd.gov/health-data-reports/healthcare-facility-reports/">https://doh.sd.gov/health-data-reports/healthcare-facility-reports/</a>.

PLEASE NOTE: Deemed provider surveys are conducted by their respective accrediting organization. The DOH does not have the authority to post those survey results. Therefore, this survey information is not available on our website.

#### **POLICIES, RULES, AND LEGISLATION**

The Office of Licensure and Certification updated the administrative rules for nursing homes to clarify the minimum regulations for nursing homes. These rules went into effect November 11, 2024.

# NURSING HOME & ASSISTED LIVING CENTER SUPPORT

- 1. The Office of Licensure and Certification received \$2.5 million in 2023 to support the Nursing Home & Long-term Care Facility Strike Team and Infrastructure Project awarded through CDC's Epidemiology and Laboratory Capacity (ELC) Cooperative Agreement (CK19-1904). This funding ended in May 2024. Throughout the funding opportunity, 72 assisted living centers (ALCs), two ALC/nursing facilities (NF), 15 NF, two skilled nursing facilities (SNF), and 59 SNF/NF utilized the \$20,000 awards to support workforce recruitment and retention activities to enhance infection prevention and control infrastructure in their facilities. These funds were utilized for various recruitment and retention strategies from training needs, retention/recruitment bonuses, professional development, agency staffing costs, conference
- attendance, and other innovative strategies to support recruitment and retention of a qualified workforce, and had a significant positive impact on the facilities that applied for and received the funding.
- 2. During the 2024 legislative session, the legislature passed Senate Bill 209 which appropriated \$5,000,000 in federal fund authority relating to the American Rescue Plan Act (ARPA) to the Office of Licensure and Certification. The purpose of the grants is to use ARPA dollars to provide telemedicine technology to assisted living centers and nursing centers in remote and underserved parts of the state. This funding must be obligated by December 31, 2024, and spent by December 31, 2026. Eightynine providers have been notified of anticipated awards with potential to positively impact the lives of approximately 4,267 residents.

# Office of Health Protection

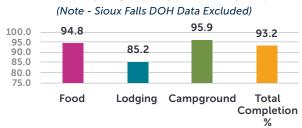
The Office of Health Protection (OHP) regulates food service establishments, mobile food services, temporary food services, lodging establishments, and campground establishments through licensing and inspection programs. OHP staffing consists of four regional advisors, two office support staff and one program administrator. OHP partners with SD Department of Public Safety and Sioux Falls Department of Health inspectors to complete statutorily required inspections within the state. The focus of our inspection efforts is to educate and promote recognized best practices in the area of food and environmental safety. OHP's top priority is to help protect our citizens and visitors by preventing illness and injury.

#### **FY24 ACHIEVEMENTS**

In FY24, OHP licensed or registered close to **6,250 establishments** within South Dakota with over **7,500 corresponding inspections completed**. The number of completed inspections versus the number of statutorily required inspections improved to 93.2% in FY24 which was an increase of 1.7% compared to

the previous year. Findings from these inspections can often translate into real improvements and potentially prevent serious injury or harm to the public. For example, a lodging inspection highlighted several fire and life safety issues. Eventually, after additional assistance from the state Fire Marshal, the nearly 100-year-old building was ultimately closed and demolished in November 2023 in response to the concerns raised in the inspection.

#### **FY24 INSPECTION COMPLETION %**



In addition, OHP spent a significant amount of time and resources in FY24 addressing consumer complaints received from residents and visitors. OHP fielded over 200 consumer complaints during FY24.

Complaints on food establishments primarily dealt with illnesses, sanitation, and food temperatures. Lodging complaints centered around bed bugs, cleanliness, and the vast number of unlicensed short term rental home properties being advertised

unlawfully. Complaints concerning possible food borne illness outbreaks and fire and life safety issues are prioritized for further investigation and possible corrective action.

# Office of Medical Cannabis

The Department of Health's **Office of Medical Cannabis** is responsible for ensuring patient safety and responsible access to medical cannabis products through the issuance of medical cannabis cards to eligible cardholders and the regulation of medical cannabis establishments in South Dakota.

The Medical Cannabis program passed the twoyear mark for access by patients to legal medical cannabis. The program is fully operational, including establishment inspections and seed to sale inventory tracking.

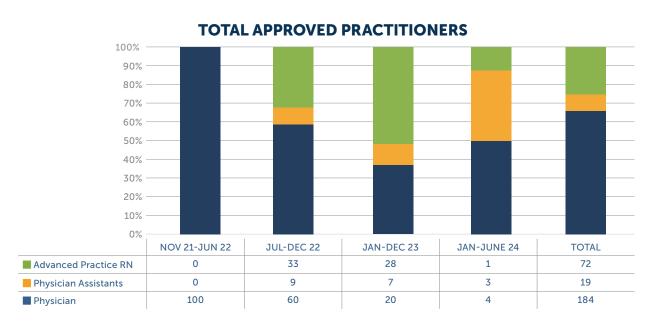
As of June 20, 2024, there were **13,325 active** cardholders, **780** registered caregivers, **275** registered practitioners, and **145** certified establishments.

During the past fiscal year the program conducted 74 inspections (41 medical cannabis dispensaries, 21 cultivation operations, 10 manufacturers, and two testing facilities), averaging approximately six inspections per month.

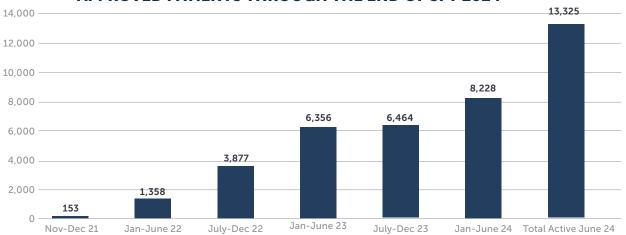
In 2024, the Office of Medical Cannabis updated its administrative rules to raise the fee for an establishment registration certificate to \$9,000 per year in accordance with SB 43 to effectively fund program operations (including the addition of three program staff), including conducting inspections, providing customers service and technical guidance, processing applications for patients, caregivers, practitioners, and establishments and maintaining software systems to track inventory, sales, and applications.

#### **MEDICAL CANNABIS DATA**

As of June 20, 2024, there were a total of 13,325 active cardholders and 780 approved caregivers with only one patient application denial. The charts below depict the number and type of certified practitioners and establishments and shows the overall progression of approved patients.

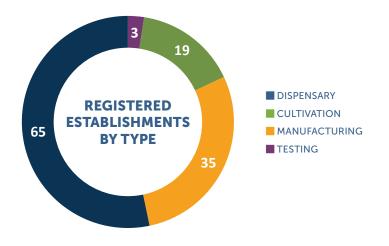


#### **APPROVED PATIENTS THROUGH THE END OF SFY 2024**



#### PATIENT NUMBERS BY DEBILITATING MEDICAL CONDITION

1.	Severe, debilitating pain	10,001	72.71%
2.	Post - traumatic stress disorder	1,608	11.69%
3.	Severe and persistent muscle spasms	574	4.17%
4.	Severe nausea, except nausea associated with pregnancy	514	3.74%
5.	Cancer or its treatment, if associated with severe or chronic pain, nausea or severe vomiting, or cachexia or severe wasting	480	3.49%
6.	Seizures	153	1.11%
7.	Multiple sclerosis	122	0.89%
8.	Epilepsy and seizures	113	0.82%
9.	Crohns disease	99	0.72%
10.	Cachexia or wasting syndrome	68	0.49%
11.	Acquired immune deficiency syndrome or positive status for human immunodeficiency virus	20	.15%
12.	Amyotrophic lateral sclerosis	3	.02%



# **Accreditation & Reporting**

#### **ACCREDITATION**

The Department of Health has started the prerequisite work to apply for Public Health Accreditation Board (PHAB)

# Health Department Accreditation in

2024. Accreditation is



a measurement of how well a health department meets the 10 Essential Public Health Services framework. Accreditation promotes public trust and demonstrates a commitment to quality and performance improvement to better serve the community. Through this process, we have an opportunity to share our story on how we are meeting essential services by policies and documentation.

In 2023, South Dakotans were encouraged to make their voice heard by providing feedback for the *State Health Assessment (SHA)* through a priority health indicator assessment, community conversations, and key informant interviews.

Using the 2023 SHA as a data foundation, in 2024 we focused on bringing together a health improvement coalition to assist with completing the corresponding *Statewide Health Improvement Plan (SHIP)*. The SHIP serves as a five-year strategic framework for developing and implementing community health improvement strategies and continues to emphasize statewide collaboration and alignment. The 2024-2029 SHIP includes health priorities, aims, goals, measurable objectives, strategies, and assets. The SHIP will contribute to the ongoing monitoring of community health needs, health disparities, and high-risk populations, which is needed to identify barriers and take action to find solutions.

Together, the SHA and SHIP serve as a strategic planning guide for DOH and the many other statewide partners and stakeholders who share in the vision of Every South Dakotan Healthy and Strong. Collaboration with partners across South

Dakota is pivotal in shaping a healthier future for all. The SHIP





**Every South Dakotan Healthy and Strong** 



and SHA are living documents requiring continuous input, evaluation, and adaptation. They represent the Department of Health's commitment to addressing immediate health challenges while laying a strong foundation for long-term health equity and resilience.

To qualify for accreditation, a health department must have formalized organizational plans that demonstrate a commitment to quality improvement, workforce sustainability, and community engagement. DOH continues to make progress in completing and operationalizing these plans with a plan to apply for accreditation in July 2025.

# PUBLIC HEALTH INFRASTRUCTURE AND WORKFORCE GRANT (PHIG)

DOH continues to support the health department's core responsibilities by applying grant dollars from the **Public Health Infrastructure Grant (PHIG)** to workforce, foundational capabilities, and data modernization.

The three main strategies of this grant are Workforce, Foundational Capabilities, and Data Modernization. Ultimately, this grant will lead to accelerated prevention, preparedness, and response to emerging health threats, and improved outcomes for other public health areas. The Department is focused on key investments aimed at strengthening the state's public health infrastructure. Anticipated outcomes include increasing the public health workforce, stronger public health foundational capabilities, and increased availability and use of public health data.

A central priority is the continued development of the public health workforce. To this end, the DOH is investing in key roles that will ensure the sustainability of critical functions within the department. This includes positions focused on licensure, accreditation, workforce coordination,

and performance management. These roles will lead the implementation of strategic plans, guide needs assessments, and improve internal processes to increase operational efficiencies.

Efforts are also underway to enhance training and collaboration across various public health stakeholders. The department is committed to supporting local jurisdictions, particularly those serving populations with health disparities, through the allocation of resources based on current needs and future priorities. Public health accreditation efforts will be strengthened through evidence-driven planning, continuous quality improvement, and enhanced management systems for grants and contracts.

The DOH is also prioritizing the development and retention of essential positions, including roles

focused on ongoing public health education, workforce training, and increasing communication and partnership engagement across sectors. The integration of funding from multiple streams ensures that efforts are coordinated and impactful, strengthening core public health capabilities and enhancing sustainability.

As the DOH works with federal partners to implement and refine these plans, the department is committed to adapting roles and responsibilities as needed, based on new information from needs assessments and ongoing analysis. The goal is to build a more resilient public health workforce and improve the health outcomes of all South Dakotans through strategic investments and continuous improvement efforts.

# Offices of Vital Records & Health Data & Reporting

The **Office of Vital Records (OVR)** is responsible for the registration, modification, and issuance of birth, death, fetal death, marriage, and divorce records for events occurring within the state of South Dakota. OVR adheres to the national standards for birth and death records as established by the National Center for Health Statistics (NCHS). In addition, OVR is tasked with ensuring data quality and maintaining the integrity of vital event records for all events occurring within South Dakota, as well as South Dakota residents who experience vital events in other jurisdictions.

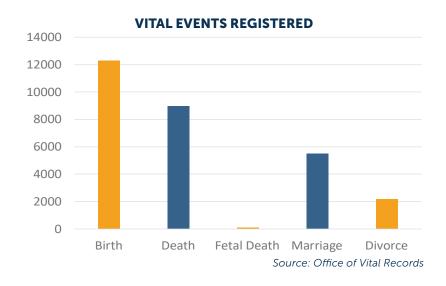
The **Office of Health Data and Reporting** collects and analyzes vital health data that is utilized by the Department of Health and made available to the public. Each year, the office compiles and publishes the Department's Vital Statistics report, providing key insights into public health trends. Additionally, the office collaborates with the CDC to administer the Behavioral Risk Factor Surveillance System (BRFSS) and the Youth Risk Behavior Survey (YRBS), further supporting the Department's efforts to monitor and address health-related behaviors and outcomes.

#### **REGISTRATION**

In FY24, the Office of Vital Records (OVR) registered and certified

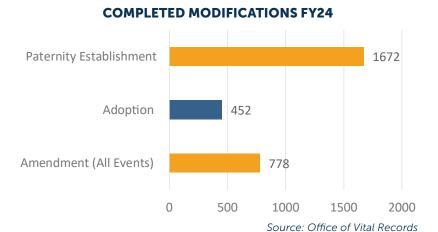
- 12,283 births
- 8.944 deaths
- 88 fetal deaths
- 5,500 marriages
- 2,171 divorces

OVR is responsible for the training and certification of data collectors which include birth facility information managers, funeral directors, medical certifiers, and county coroners.



#### **MODIFICATIONS**

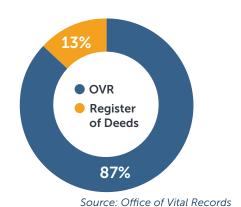
The Office of Vital Records is responsible for completing legal modifications to all vital events. Modifications include paternity establishment through voluntary recognition or court orders, amendments to records via affidavits or court orders, and the processing of adoptions. Additionally, OVR is tasked with establishing delayed or late-filed records, ensuring the accuracy and completeness of vital event documentation.



#### **ISSUANCE**

Issuance of informational and certified copies of vital records is completed by both the Office of Vital Records (OVR) and 64 county Register of Deeds (ROD) offices throughout the state. Certificates can be requested in person, through the mail, over the phone or online. An annual performance measure for OVR is to shift 85% of total issuance to local counties.

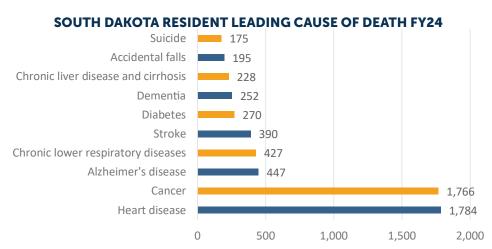
In FY24, a total of **103,364 copies** were issued with 87% of issuance being completed at the county Register of Deeds offices throughout the state.



#### **LEADING CAUSE OF DEATH**

In FY24, the Office of Health Data and Reporting collected and analyzed **8,643** South Dakota **resident deaths**. This includes the deaths registered by OVR as well as any death record of a South Dakota resident registered in another state and reported to South Dakota.

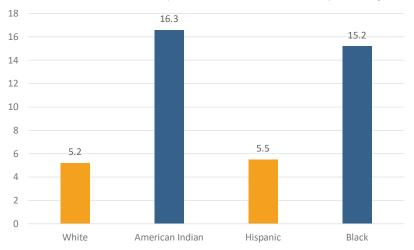
The leading causes of death for South Dakota residents for FY24 are shown on the right.



Source: South Dakota Department of Health

#### **INFANT MORTALITY**

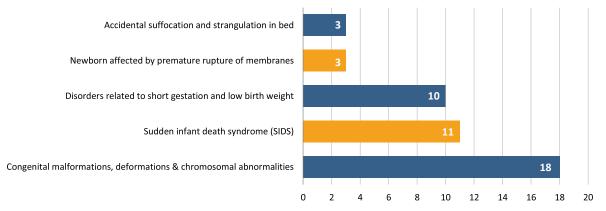
In FY24, South Dakota resident infant deaths reported for an infant mortality rate of **7.1 per 1,000 live births**. For comparison in FY23, it was 6.5 per every 1,000 live births.



Race is assigned based on standards set forth by the National Center for Health Statistics and the US Census Bureau for South Dakota's race data to be comparable to other areas.

The remaining race categories (Asian, Pacific Islander, and Multi Racial) are included in the total rate of 7.1 but are not shown specifically in the table.

#### **LEADING CAUSE OF INFANT DEATH FY24**



#### Source: South Dakota Department of Health

# BEHAVIOR RISK FACTOR SURVEILLANCE SYSTEM

The *Behavior Risk Factor Surveillance Survey* (*BRFSS*) is an annual, telephone survey administered by the Department of Health in conjunction with the CDC. This survey collects data on the general health and health risks of South Dakota residents and consists of questions aimed at tracking and trending prevalence of health behaviors and conditions over time

The survey is administered to households with adults aged 18 years or older, and all information collected is strictly confidential. Individual responses are aggregated and presented as a single figure for

each survey question, ensuring that no individual responses can be identified. This process maintains the privacy of participants while providing valuable data for analysis and reporting.

As of October 2024, 4,642 surveys have been completed to collet valuable information on various health behaviors, chronic conditions, and risk factors that affect the health of South Dakota populations and communities.

#### YOUTH RISK BEHAVIOR SURVEY

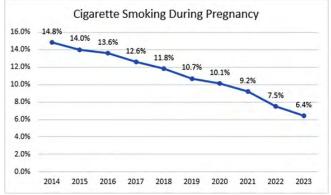
The **Youth Risk Behavior Survey (YRBS)** gives students a chance to share their voice anonymously and voluntarily.

The survey is conducted every two years, with districts, schools, and students randomly selected to participate. The participation of each selected school is crucial to ensure that the results are representative of youth both statewide and nationally. This survey helps illuminate students' experiences, providing valuable insights that enable parents, districts, and schools to identify and address challenges effectively, ensuring that the most appropriate resources and support are provided.

The next iteration of the Youth Risk Behavior survey will be conducted in fall 2025.

#### **CIGARETTE USE DURING PREGNANCY**

Data collected at birth registration shows that cigarette smoking during pregnancy has reached its lowest recorded rate of 6.4%. This is the lowest rate since tracking began in 2006, when the rate was 19.2%.



Source: South Dakota Office of Vital Records

#### **PRIORITY PROJECTS**

The Offices of Vital Records and Health Data and Reporting collaborate closely on several priority projects to support the Department's efforts in surveillance and disease prevention. That data collected and monitored through these priority projects plays a crucial role in enabling other DOH programs to utilize birth and death statistics for making informed, data-driven decisions on public health efforts. In addition to regular operations, these offices prioritized a comprehensive quality review of statistics related to the impact of syphilis on births and deaths, infant mortality, and deaths due to malnutrition.

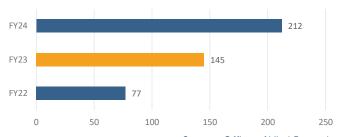
#### **Syphilis**

The CDC reports the rate of syphilis in mothers giving birth increased from 87.2 to 280.4 per 100,000 births from 2016 to 2022. Pregnant women infected with syphilis can transmit it through the placenta to the fetus or at birth to the infant.

The Offices of Vital Records and Health Data and Reporting continue to actively monitor the number of mothers delivering with syphilis, as well as any infant deaths where syphilis infection has been a contributing factor. This ongoing surveillance is critical for identifying trends and informing targeted public health interventions aimed at reducing the impact of syphilis on maternal and infant health.

Prior to registration, verification of a positive syphilis infection is completed in collaboration with the birthing facility or midwife registering the birth. In addition to this initial verification, the Office of Health Data and Reporting conducts weekly queries to identify birth records indicating that the delivering mother was treated for syphilis during pregnancy. When such cases are flagged, the Office of Vital Records follows up with the birthing facility and medical records to confirm the presence of a positive syphilis diagnosis. This thorough verification process ensures that accurate and reliable data is reported, supporting effective public health monitoring and response.

# BIRTHS REGISTERED INDICATING DELIVERING MOTHERS TREATED FOR SYPHILIS



Source: Office of Vital Records

### **EVENTS & CONFERENCES**

#### **Malnutrition**

According to the 2023 South Dakota Mortality Report, there is a significant increase in deaths due to malnutrition.

#### SOUTH DAKOTA DEATHS DUE TO MALNUTRITION BY YEAR

2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
16	13	27	17	49	62	86	71	106	122

Source: South Dakota Department of Health

While malnutrition is not considered an ill-defined cause of death, it can often be initiated by various comorbidities (two or more co-occuring diseases or medical conditions). To monitor the increase, any death record indicating malnutrition as the cause of death are thoroughly verified with the death certifier responsible for filing the record to ensure any additional relevant comorbidities causing malnutrition are listed on the official death certificate. This verification is completed prior to registration to ensure the completeness and accuracy of the data to support reliable public health reporting and surveillance.

# **Conferences**

#### **HEALTHCARE REVOLUTION SUMMIT**

The 2024 Healthcare Revolution Summit was a landmark event, gathering healthcare professionals, leaders, and workforce experts from across South Dakota to address critical challenges and drive innovation. Over two impactful days, attendees engaged in dynamic sessions, including keynotes by LeAnn Thieman on essential self-care for a thriving workforce and Andy Masters, who shared engaging leadership lessons inspired by Hollywood.



The summit featured a standout State Government Workforce Programs panel, moderated by Emily Kiel, with insights from state leaders Josie Peterson, Laura Scheibe, Kendra Ringstmeyer, and Lindsay Olson, who discussed strategies to support South Dakota's evolving healthcare needs.

Breakout sessions focused on Healthcare Innovation and Recruitment and Retention, providing attendees

with actionable insights to bring back to their organizations. Additional workshops, led by experts such as Mark Schmidt, Angie Dahlke, Erika Huber, and Alyssa Olson, tackled topics from fostering workplace culture to building resilience among healthcare heroes and expanding the role of Community Health Workers.

With the dedication of event planners, speakers, and enthusiastic attendees, the 2024 Healthcare Revolution Summit successfully laid a foundation for ongoing collaboration and growth in South Dakota's healthcare workforce, strengthening its capacity to meet future demands.

# CREATING HEALTHY AND WEALTHY COMMUNITIES WORKSHOP

The Department of Health, along with sponsorship from Wellmark and the South Dakota Department of Tribal Relations, held a community grant workshop October 1-2, 2024, at the Highland Event Center in Mitchell, South Dakota. The conference attracted a total of 157 attendees.

The event featured a comprehensive two-day agenda designed to equip attendees with practical skills and knowledge for successfully navigating the grant application process and managing projects within their communities.

### **EVENTS & CONFERENCES**

# Day 1: Building a Strong Foundation for Grant Projects

The first day of the conference focused on laying the groundwork for successful grant proposals and project development.

1. State Health Assessment and State Health Improvement Plan (SHA/SHIP) Training:

Attendees were introduced to the process of gathering crucial data for project justification, with a special focus on the SHA and SHIP. These tools are essential for determining community health needs and crafting compelling narratives and data for grant applications.



- 2. Guest Speaker Drew Conrad: The day featured Drew Conrad, who spoke on the concept of Wealth Capitals. This session highlighted how communities can leverage various forms of capital—such as financial, human, and social capital—to strengthen their capacity for project implementation and grant success.
- 3. Community Collaboration: The TaTanka Trail Project from Fort Pierre was showcased as a model for successful community collaboration. The session emphasized the importance of partnerships and community engagement in driving forward large-scale initiatives that benefit tribal populations.

#### Day 2: Practical Grant Management Skills

The second day provided attendees with handson training in key aspects of grant management, ensuring they were well-prepared to apply for and manage funding effectively. **The day's sessions included:** 

1. Finding a Grant: This session guided attendees through the process of identifying suitable funding opportunities for their projects, including where to search for grants and how to assess eligibility.

- 2. Reading Requests for Proposals (RFPs):
  - Attendees were given practical advice on how to read and interpret RFPs, helping them better understand the expectations of funders and how to tailor their applications to meet these requirements.
- **3. Needs Assessments:** This session emphasized the importance of conducting thorough needs assessments to ensure that proposed projects are aligned with the most pressing community issues, and that grant proposals are data-driven and targeted.
- 4. Budgeting and Project Management: The conference also covered essential skills in project budgeting and management, ensuring that participants could effectively allocate resources and oversee the execution of their projects. Techniques for tracking progress, measuring outcomes, and staying within budget were discussed in detail.
- 5. Evaluation: A key component of project success is the ability to assess and report on outcomes. This session provided guidance on evaluating project effectiveness, ensuring that funding sources receive clear reports on how resources are being utilized and what impact has been achieved.



Overall, the grant workshop provided attendees with valuable resources, tools, and networking opportunities to enhance their capacity to secure and manage grant funding. The event was well-received, with participants expressing appreciation for the practical nature of the sessions and the expertise shared by the speakers and trainers.

## **EVENTS & CONFERENCES**

#### **INDIGENOUS HEALTH SUMMIT**

The first-ever

Indigenous and Integrative Health **Summit** was held on September 24, 2024,



in Oacoma with 120 attendees gathered for this milestone event, including tribal leaders, healthcare professionals, and key government officials. Notably, Chairmen Lengkeek from Crow Creek Sioux Tribe and Robert Flying Hawk from Yankton Sioux Tribe attended, as well as members from the Departments of Health and Tribal Relations. The summit focused on fostering collaborative public health strategies and building stronger relationships between tribal and state health services.



Throughout the day, attendees explored a variety of topics, including the Lakota worldview of health, the integration of indigenous healing practices with Western medicine, and the importance of trauma-informed care in Indigenous communities. A

major highlight was the keynote address by Richard Two Dogs, who shared valuable perspectives on health, wellness, and healing from a Lakota cultural standpoint. His presentation served as a powerful reminder of the importance of cultural relevance in healthcare. Attendees also heard from Dr. Eric Thompson on integrative and lifestyle medicine, emphasizing holistic approaches to health.

The summit provided an excellent opportunity for tribal and state health leaders to connect, share knowledge, and develop emerging partnerships. There was a shared sense of commitment to continuing the dialogue, ensuring that these conversations translate into tangible actions to improve the health and well-being of Indigenous communities in South Dakota. This event represents a significant step forward in strengthening relationships, fostering collaboration, and advancing public health initiatives across the state.

#### **10TH ANNUAL SOUTH DAKOTA HEALTH LINK FALL FORUM**

The 2024 South Dakota Health Link Annual Fall Forum, held on October 10, 2024, at the Sioux Falls Convention Center, was a resounding success. Celebrating a decade of "Exchanging Information, Changing Lives," the event brought together healthcare leaders, professionals, and innovators to share insights and look forward to the future of health information exchange.



The day kicked off with opening remarks from Kevin DeWald, Executive Director of SD Health Link, followed by a powerful keynote on the role of artificial intelligence in safeguarding patient data and enhancing cybersecurity. Attendees were inspired by stories of community health worker successes and learned about groundbreaking advancements in data utilization and clinical decision-making.

A highlight of the day was the unveiling of the latest technology updates set to transform SD Health Link in 2025. With a focus on innovation and collaboration, the discussions throughout the forum showcased the positive impact of Health Link's efforts on improving care and health outcomes across South Dakota.

With engaging presentations, networking opportunities, exhibitors, and exciting announcements, the 10th Annual SD Health Link Fall Forum was a true celebration of the past decade's achievements and a launchpad for continued progress in health information exchange in South Dakota.

## STRATEGIC PLAN UPDATES



# Strategic Plan 2025-2027

We concluded our five-year strategic plan and developed a plan for 2025-2027. The newly developed strategic plan is rooted in community engagement, health equity and outcomes, healthcare workforce, data and technology, quality improvement, and fiscal sustainability.

### **VISION**

Every South Dakotan Healthy and Strong

#### **MISSION**

Working together to promote, protect, and improve health

#### **GUIDING PRINCIPLES**

**Integrity.** We serve with truthfulness, transparency, and accountability.

**Data.** We collect, analyze, and share information to impact positive outcomes.

**Innovation.** We encourage creative solutions to meet public health needs.

**Equity.** We recognize disparities and address health factors to improve quality of life.

**Connection.** We foster and maintain trust-based relationships through respect, consistency, and open communication.





Every South Dakotan Healthy and Strong

### **MISSION**

Working together to promote, protect, and improve health