The annual celebration of EMS week in May was extra special this year as Sanford AirMed Fargo celebrated 30 years of caring for patients in North Dakota, Northern Minnesota, and Northeast South Dakota. Currently AirMed Fargo has 85 employees including nurses, paramedics, respiratory therapists, pilots and mechanics. The medical personnel provide transports for multiple types of patients including the specialty transport of pediatric, maternal and neonatal patients.

AirMed Fargo has witnessed great change to medical air transport over the years, but one change in particular has been the increase in competition in their service area. They have been involved in the opening of new AirMed bases in Minnesota and North Dakota not only as a response to increased competition but also as a service to the growing populations in those areas.

Along with the new bases, an outreach coordinator position was created to help develop relationships with medical facilities and ambulances throughout the region. Tim Meyer, clinical director for AirMed Fargo, wants medical facilities and ambulances in the region to know when they call for AirMed services that they are ultimately getting an extension of the medical center in Fargo with teams that offer quality critical care services and safe transport for their patients. Safety has always been at the forefront of air transport in Fargo and they continue this by making sure that everyone at AirMed Fargo has a voice. Meyer states, “If they feel something isn’t safe or correct, we want to have a culture that empowers them to bring that forward.”

Looking to the future, Meyer says everyone is excited for the new medical center to be completed in Fargo. He also hopes the excitement will only build on the pride the entire medical center has for the flight program. “From administration through housekeeping, the hospital is proud of the organization and the flight teams are treated like rock stars throughout the facility.”
Sanford AirMed conducts a live accident drill.

By Keith Phillip, Greg Van Den Berg, and Josh Wieland

On July 1, Sanford AirMed conducted a live Post Accident Incident Plan (PAIP) drill to test the policies and procedures required to meet the accreditation standards of the Commission on Accreditation of Medical Transport Services (CAMTS). This article is written from the perspectives of the safety director, who planned the drill, one of the crew members in the aircraft, and the communications specialists, who ultimately initiated the PAIP.

Safety Director: I had recently returned from a safety management training seminar where colleagues from across the nation discussed recent PAIP drills conducted at their organizations, and I was instantly intrigued with the intricacies involved in these drills. I then proposed an idea to a few AirMed directors here in Sioux Falls. The drill would involve a “real” flight where a helicopter experiences a mechanical issue and needs to set down in a field. The flight would involve the AirMed pediatric team and our helicopter (AM9) responding to Viborg, S.D. The patient information would be fabricated and a pre-determined landing zone would be used. The initial goal was to test our team members’ safety training and the response of the communications center – and keep it a secret from everyone else. During one of our planning meetings, more training ideas were generated and we increased our goals for the drill. We decided to involve first responders including: South Dakota State Radio, South Dakota Highway Patrol, county emergency managers and local EMS/police/fire organizations to locate and respond to the downed aircraft only knowing it was a drill after they initially responded to the call. Planning this drill took a lot of coordination with first responder managers as well as those behind the scenes in Sioux Falls who assisted in creating the flight. We also decided to have the pilot (who was in on the secret) shut off all tracking capabilities and radio communication with our communications center to make this as “real” as possible. In the EMS flight world, making it “real” is critical in order for staff to think, “This could happen to me.” The drill was a success, and we had very positive feedback from the first responders and from our AirMed staff. After debriefing the flight with our AirMed staff, we knew we had accomplished our goals, but then discovered additional educational opportunities for our staff. The ultimate goal in any training exercise is to not find faults, but to identify areas our team can improve upon to grow safer as a program. Look for more live drills from the AirMed safety team in the future.

Medical Crew: While returning from a transport, I remember hearing “peds team” and “Viborg,” and feeling relieved for a short flight. It was a humid day and I was working my last shift for the week. After bringing the patient to the emergency department, I rushed back up to the hanger and quickly prepared for the flight. While waiting in the helicopter as the pilot went through the startup procedure, I quickly identified the location information I needed from the iPad kept in the helicopter and waited for lift off. The flight was normal; nothing seemed out of the ordinary until the pilot stated to me that he felt a “vibration in the pedals.” Soon after, the pilot told me he felt it was best to land and that I should notify the communications center we were going to make a precautionary landing. At that moment I realized for whatever reason – humid day, multiple flights – I was not well prepared for the situation at hand. The first thing that came to my mind while I was formulating what to say to the communications center was: “I’m not sure of our exact location and none of the small towns below looked very familiar.” I have not lived in Sioux Falls very long and did not grow up around the area, so rural areas surrounding Sioux Falls are unfamiliar to me. I then used the only info I had readily available which was our reaming flight time to Viborg, which was six minutes. As I relayed our unplanned landing and location, the pilot turned off the communications in the helicopter cutting off the information I was trying to transmit. While in the moment I thought it odd he would do this, it also made me believe the situation was serious and he was preparing for a quick landing. The entire crew then focused on looking outside for a suitable landing spot. There was spectacular coordination and communication between the entire crew
Sanford AirMed expands to Dickinson, N.D.

The Western North Dakota region around Dickinson will soon be serviced by Sanford AirMed. A Sanford King Air B200 fixed-wing aircraft will serve the region along with our highly trained team of flight paramedics, flight nurses, pilots and mechanics.

One year ago, Sanford delivered on its merger promise by expanding Sanford AirMed services to Bismarck. Now, the promise of Sanford’s commitment to serve people continues by expanding these essential air transport services to an area of need.

When Med-Trans, a national provider of air transport services, made the decision to close its office in Dickinson, Sanford chose to step in. Air transportation is vital in rural areas because it can quickly deliver life-saving care when needed. The benefit of using this plane is it can travel a range of 1,500 miles, is short-runway capable – crucial for some rural airports – and has the ability to carry two patients along with two to five critical care attendants.

Sanford has long served the Dickinson region with a clinic, so this is a logical expansion of our services. In February 2014, the new Sanford Health Dickinson Clinic opened, replacing the old clinic. Located along I-94, the new facility is more than six times the size of the former clinic location and can house more than 20 physicians, providing better patient access than ever before.

Sanford AirMed service can be activated by hospitals and first responders, such as the local ambulance service, fire department or law enforcement. Sanford AirMed will transport patients to the facility of their choice or to the nearest appropriate medical facility. We typically serve patients in North Dakota, South Dakota, Minnesota and Montana. Since its beginning, Sanford AirMed has flown more than 60,000 patients.
Sanford AirMed receives first enterprise-wide accreditation

After 18 months of preparing for the survey, AirMed received the Commission on Accreditation of Medical Transport System’s (CAMTS) accreditation. AirMed is Sanford’s first department to be accredited as an enterprise, as it is established across all four regions as one program.

In order to obtain accreditation, a medical transport service must be in substantial compliance with the accreditation standards. AirMed credits their success to using best practices established from the former Sanford LifeFlight and Sanford Intensive Air programs and applying it to the enterprise program. Along with this achievement, AirMed is the only accredited medical transport system in North Dakota.

CAMTS is an organization comprised of for-profit and nonprofit organizations that improve the quality and safety of medical transport services. They believe the two highest priorities of an air medical transport service are patient care and safety of the transport environment. Their accreditation standards address issues of patient care, quality, communications, aviation standards, management and safety in fixed- and rotary-wing services as well as ground services that provide critical care transports. Each standard is supported by measureable criteria to ensure a program’s level of quality.

Standards are periodically revised to reflect the dynamic and changing environment of medical transport with conservable input from all disciplines of the medical profession. They serve as a marker of excellence for federal, state and local government agencies as well as private agencies and the general public.