Training highlights AirMed’s commitment to excellence

Hello and thank you for taking the time to read the latest edition of Flight Notes. At Sanford AirMed we are committed to being leaders in air medical transport. Our transport teams utilize the latest standards of care and treatment. We are also committed to developing those standards through our quality improvement and research projects. Moving forward, each edition of Flight Notes will feature a story highlighting the cutting edge care provided by AirMed flight teams and our regional medical centers.

During the second week in May, AirMed hosted two site surveyors from the Commission on Accreditation of Medical Transport Systems (CAMTS). Accreditation from CAMTS involves voluntary evaluation of compliance with industry standards established by the CAMTS board. One of the main areas of CAMTS focus is education. In today’s Education Corner I want to spotlight the tremendous effort and hard work required from our crews to meet these standards, while still operating one of the nation’s busiest hospital-based flight programs.

When interacting with the public, one of the questions flight teams hear most often is, ‘How can I become a flight nurse or paramedic?’ A unique aspect of being an AirMed clinician is the autonomy afforded to crews while operating in the field. AirMed flight crews are expected to recognize a patient’s clinical signs and symptoms and implement appropriate treatment protocol with limited or no contact with a physician. Situational awareness and clinical decision-making ability are necessary to make these decisions and are developed over time through clinical experience. That is why all AirMed clinical team members must have at least three years of clinical experience before applying to the program. AirMed requires clinical experience for nurses be obtained in ICU or in an active emergency department setting. Paramedics must have experience in a busy 911 EMS system, most often found in large cities.

The AirMed orientation program spans 12 to 16 weeks, depending on the new team member’s background. New hires complete various checklists ensuring...
proficiency and understanding of AirMed policies, equipment and safety culture. As a hospital-based flight program, new hires have a unique opportunity to gain valuable, hands-on experience while completing clinical rotations in each of our specialty care units. In addition to clinical rotations, our new clinicians also spend a series of shifts with our anesthesia team. Advanced airway management is one of the most frequently used — and highest-risk — skills our team members have to master. The ability to refine these techniques in a controlled setting is invaluable when facing adverse situations in the field. During flight shifts, new team members are assigned a preceptor who provides feedback and ensures proper care as the new team member develops critical care skills. Down time for new team members is scarce, but when it arises it is used to complete the more than 25 hours of didactic education via our online classroom.

At the conclusion of orientation, new team members must pass a skills review with their respective medical director ensuring each new employee is able to implement and perform all protocols and procedures from memory without assistance. In addition to the skills review, each orient must pass a readiness review, which is used to evaluate critical thinking abilities and understandings of AirMed policies, procedures and culture. Upon successful completion of the review process, the new team member is awarded their AirMed nametag and wings to mark completion of this extensive process.

Regardless if you have just completed the orientation process or are a team member with more than 2,000 flights, the training process is ongoing. Each AirMed team member is required to be board-certified in critical care transport within two years of hire. These exams are among the most difficult in the medical profession. Obtaining board certification is a huge accomplishment and maintaining it requires the completion of 100 hours of continuing education over a four-year timeframe.

Because our nurses and paramedics care for patients of all ages and medical conditions, team members are required to complete at least one clinical rotation every quarter in their regional medical center’s ICU, PICU, NICU and HROB units. Our education team also utilizes high fidelity simulation mannequins to challenge our clinician’s critical thinking ability in a learning environment on a quarterly basis. All AirMed clinical team members are required to maintain certifications in: BLS, ACLS, NRP, STABLE, PALS and ATLS. If you visit the medical centers in Sioux Falls or Fargo, you may see AirMed team members performing care in inpatient areas. When available, AirMed team members provide care to high-acuity patients, often times performing advanced procedures in coordination with attending physicians.

Sanford AirMed clinicians are committed to delivering the advanced care found at our regional medical centers to the rural communities in our service area. Please rest assured that the team assuming care of your patient or family member consists of the most highly trained air medical professionals.

Eric Hoy
Education Coordinator
There’s no substitute for safety

In our lives, we often are told to ‘Be Safe.’ What does it actually mean?

I recall being told by my parents at a young age to be safe around fireworks. Yet, when I was 8, my friend Jesse and I thought it would be a good idea to bounce lit smoke balls back and forth to each other. We were successful at first, boosting our confidence that our parents were wrong. We found our timing off three throws later and you can imagine what happened.

At Sanford AirMed, we strive to be safe on every transport. However, after a few ‘normal’ flights, complacency can easily sneak in. It can happen in the form of not utilizing a checklist, not following a process or simply believing something can’t happen to you. In the safety world, we walk a fine line trying not to be overbearing with the ‘Be Safe’ mentality while ensuring operations occur within the acceptable limits, every time. Being safe also means being vigilant, which happens to be the antidote for complacency. Vigilance leads to being proactive. And when teams operate proactively, they become safe by seeing threats before errors take place.

Written out, the ‘Be Safe’ cycle I just described is easy. But applying it to everyday, real-world operations can be tricky because — like an 8-year-old — some may think they have something to prove or something can’t happen to them. In the end, we need to be leaders, regardless of our individual role, and remain engaged as a team to focus on our goal of being safe, every time.

Keep your antennas up!

Josh Weiland
Lead Safety Officer

Accreditation process provides opportunities for improvement

In May, Sanford AirMed completed a Commission on Accreditation of Medical Transport Systems (CAMTS) re-accreditation survey. CAMTS is a voluntary process of peer review with programs earning accreditation based on compliance with standards. These standards scrutinize areas including: aircraft, communications, infection control, medical direction, safety, training and education, quality management and clinical practice. The CAMTS process provides many internal and external benefits such as improved patient care, enhanced safety and increased focus on prevention rather than reaction. Members of accredited teams also enjoy a sense of pride. This year’s survey involved two CAMTS surveyors visiting our bases in Dickinson and Fargo, N.D., Bemidji, Minn. and Sioux Falls, S.D. At each base they inspected equipment and aircraft, interviewed staff, reviewed patient records, monitored our quality management program and looked at our processes for education and orientation. As a program we spent six to 10 months preparing for this in-depth survey. Part of that preparation involved putting together a Program Information File consisting of 164 separate folders, each featuring different types of information for surveyor and board review.

Overall, this comprehensive audit enables our program to identify opportunities for growth while enhancing our effectiveness. Sanford AirMed is the only CAMTS-accredited air medical program in North Dakota and is one of three in both South Dakota and Minnesota.

Accreditation is good for three years.
Flight nurses specially trained to serve Sioux Falls region

The Sanford AirMed Pediatric Transport Team nurse is based at the Sanford Children’s Pediatric Intensive Care Unit in Sioux Falls, S.D. This specialty team includes a PICU registered nurse, paramedic and respiratory therapist. The pediatric flight nurse works 12-hour shifts beginning at 6:30 a.m. and 6:30 p.m. and is available not only to respond to a flight request at any time, but to pediatric rapid responses, code blues, Level I traumas in the emergency department and also serves as the clinical coordinator for the 12-bed PICU in Sioux Falls. Our flight nurses are certified in PALS, ENPC, ACLS, TNCC and pediatric CCRN. All of our nurses have at least three years PICU experience, with many having more than 10 years experience.

During a shift, the flight nurse rounds on PICU patients with our interdisciplinary intensive care team, assists bedside nurses with patient care and procedures, responds to emergency situations throughout the hospital, supports the emotional needs of families as well as flying to referring facilities for patients in need of a higher level of care. Our pediatric specialty team is trained in the following lifesaving procedures:

- Arterial blood gases
- Chest tube placement
- Emergency airways
- Endotracheal intubation
- Needle decompression

We carry appropriate, pediatric-size equipment, medications and lab testing devices that help us provide the best possible pediatric care. The Sioux Falls pediatric team transports patients between 29 days and 18 years of age in need of medical, surgical or trauma care from one facility to another. Once the team arrives at a facility, we thoroughly assess the patient through a physical exam, by listening to the patient’s family and reviewing information from the referring team. The team discusses the situation and contacts our medical director. Medical direction is provided by one of seven board-certified pediatric critical care specialists and, in cases of trauma transport, by emergency medicine physicians.

When possible, we allow family members to fly with their children to help ease the anxiousness that such a situation can involve. Most of our pediatric flights go to Sanford Children’s Hospital in Sioux Falls where we have a comprehensive team of pediatric intensivists, hospitalists and subspecialists. Our PICU clinical services include all ventilator support modalities, continuous renal replacement therapy and extracorporeal membrane oxygenation.

Whether we are providing bedside care or juggling a busy day as a coordinator and flight nurse in the PICU, we feel honored and grateful to have the opportunity to care for Sioux Falls children and families.