VIEWPOINTS

Shopping Local Pays Off

PLAIN TALK ZSTAFF EDITORIAL

One of the first tenants of business management is that if you're not growing your business, it's shrinking. There is no stasis—if your business doesn't continually grow, it's losing ground.

Communities are much the same: If we're not participating in the growth of our community, we are ensuring that it will shrink.

Over the past few years, a number of Clay County businesses have made significant investments in their businesses and the community. Those investments take time and money. Expanding square footage and product and service offerings isn't a decision that's made lightly.

and service offerings isn't a decision that's made lightly.

Business owners have to weigh their options and determine whether there will be a return on investment.

And that return has to come from us.

Certainly tourism accounts for a large portion of the local economy, but in the winter months when the mercury drops, it's our community members who stick around. And it's locals who continue to buy their goods and services from local businesses. It's the locals who keep businesses up and running.

These investments mean more options and fewer reasons to travel out of town for many things we need and use daily. Shopping locally keeps dollars in town and is a boost to our local economy. When you spend money in Clay County, it multiplies. According to the New Economics Foundation – an economic think-tank that intends to inspire economic wellbeing - when you buy locally, twice the money stays in the community. That's due to what economists call the multiplier effect. First, your purchase creates a direct impact, the spending done by a business in the local economy to operate the business, including inventory, utilities, equipment and pay to employees. Then there is the indirect impact, that's when dollars the local business spent at other area businesses re-circulate. Finally, the induced impact refers to the additional consumer spending that happens as employees, business owners and others spend their income in the local economy.

According to Civic Economics, the local recirculation of revenue from chain retailers is 13.6 percent. That jumps to 48 percent for independently owned operations. That includes profit and labor, procurement for resale and charitable giving.

And our local businesses contribute to our community's health in ways that are less easily measured. Local businesses are frequent, generous contributors of goods, services and support for the majority of successful fundraisers, food drives and countless events that improve the quality of life in Clay County.

Local businesses have made a commitment to the community. They are here to stay and to serve our needs. Our job is to make sure we take advantage of those offers. If we don't, Clay County businesses will close their doors and Vermillion will look like a ghost town

Let's continue to support our hometown businesses like they support us.

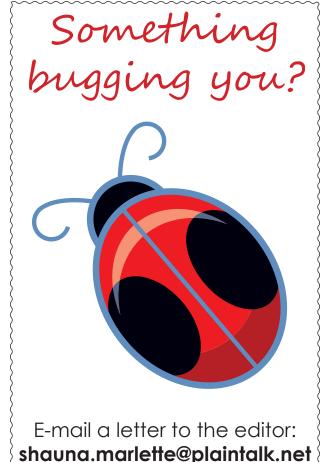
LETTER TO EDITOR POLICY

The *Plain Talk* encourages its readers to write letters to the editor, and it asks that a few simple guidelines be followed.

Please limit letters to 300 words or less. Letters should deal with a single subject, be of general interest and state a specific point of view. Letters are edited with brevity, clarity and newspaper style in mind.

In the sense of fairness and professionalism, the Plain Talk will accept no letters attacking private individuals or businesses. Specific individuals or entities addressed in letters may be given the opportunity to read the letter prior to publication and be allowed to answer the letter in the same issue.

Only signed letters with writer's full name, address and daytime phone number for verification will be accepted. Please mail to: Letters to the Editor, 201 W. Cherry St., Vermillion, SD 57069, drop off at 201 W. Cherry in Vermillion, fax to 624-4696 or e-mail to shauna.marlette@plaintalk.net.





From The Frying Pan To The Fire

BY PAULA DAMON

This past week, I was visiting my sister in Vancouver, Washington, a state boasting 22 million acres of forestland in the Pacific Northwest.

From above on my connecting flight to Portland, just over the Columbia River, Washington State offers an endless sea of super lush topography. It's aptly nicknamed The Evergreen State.

As far as the eye can see, massive wilderness, previously untouched by widespread devastation, prevails.

That was until this season, when fire declared war, winning over half a million acres.

Such devastation compelled me to pencil this poem titled "Fire Line," which goes like this....

Blazing through forests, like a massive broom, sweeping away brush and bramble, wildfire tidies Mother Nature's unkemptness.

Righting decades of draught, rendering ancient Hemlocks, Noble Firs and Cedars unrecognizable.

All that remains is a long winding trail, blackened and strewn, like a dry riverbed. Scorched and pining for replenishment with none to speak of.

Nothing left to show for generations of endurance of old growth forest.
Seasons past only a distant memory

of birthing seedlings in protected harbors, towering conifers and deciduous trees now charred beyond recognition. Such destruction Woodlands incine

Such destruction. Woodlands incinerated. Under story defaced. Lush prairie eradicated.

Or as a scorned lover, covetously snatching everything for itself, hissing

"It's mine – all mine."

Unsympathetically going about its dirty work with edgy nobility – as an heir to a long line of ruinous royalty. Incredulously muscling through

narrow ravines, prying open caverns, swapping suppleness for gritty coffins covered head to toe in soot and ash.
Traipsing over ancient hills, dancing on sod tables, stretching with epic

Ever pressing forward, slumbering

Strong winds arrow historic devastation, levying a deadly aim.

Stomping hard and fast – straight away, whirling and wailing, not looking back

Creating a black veil – an unholy shroud for mourners to gawk at in disbelief.

Splitting quiet pastoral beauty in two with venomous tongue.

Scurrying along in fits and starts, then quickly turning into scorching tidal waves.

With sadistic, unquenchable thirst, never mulling over what at will be, but rather rushing onward to annihilate what is. Wildfire snakes across wheezing

meadows, devouring in nourishing gulps, swallowing whole habitats and havens, exposing raw earth in Biblical proportions.

Ever at the ready, always in a hurry

to extinguish the old salvation route, now a graveyard laid waste.

Burned out tree stumps, as tombstones or blackened footprints.

Old wilderness – a corpse – lay flat – rigid with eyes shut. No sign of life anywhere.

Fire took care of it. And good.

At this writing, there are nine large wildfires still burning in the Cascade Range and northern regions of Washington: the Canyon Creek Complex, Chelan Complex, First Creek, Grizzly Bear Complex, Kettle Complex, Meeks Table, North Star Okanogan Complex, Tunk Block and Wolverine fires.

While firefighters on the ground, in airplane tankers and Blackhawk helicopters are battling some of the largest wildfires the state has ever seen, warm temperatures and increased winds continue to stake the flames.

winds continue to stoke the flames.
As I was leaving the Pacific Northwest and heading home to the Upper Midwest, I was struck by a newspaper article quote by Jennifer Zajac, the wife of Andrew Zajac, 26, who died fighting the Twisp fire in Okanogan County, Washington.

Addressing the fire crew of her deceased husband's, Jennifer pleaded, "Everybody, come home, because that's all we really want."

Meanwhile, thousands of firefighters, professional and qualified citizens, in 17 other states are fighting blazes, which have destroyed more than seven million acres in Alaska, Washington, Oregon, California, Idaho, Montana, Nevada, Arizona, Utah, Texas, Wyoming, Colorado, Oklahoma, Arkansas, Louisiana, North Carolina and South Carolina.

Everybody, please come home.

SOURCES: http://gacc.nifc.gov/nwcc/information/firemap.aspx; http://gacc.nifc.gov/nwcc/information/firemap.aspx; http://www.cnn.com/2015/08/23/us/washington-state-wildfires/

THINKING ABOUT HEALTH

Insured Victims of Medical Errors Can End Up With Big Bills

BY TRUDY LIEBERMANRural Health News Service

Last winter Tammy Fogall, a reader in Colorado, told me about her family's "troubled summer vacation," as she called it. A visit to relatives in Ohio had turned into a medical nightmare that left the family struggling with a \$12,000 bill plus a ringside seat to observe what happens when doctors and hospitals make mistakes.

Shortly after they arrived in Chillicothe, her 43-year-old husband, a retired Army National Guard staff sergeant, suffered a burst appendix that neither doctors at a local VA clinic or a small regional hospital where he was sent diagnosed correctly.

He languished for eight days as his belly swelled with pain and he was pumped full of antibiotics. On the eighth day doctors sent him home to Colorado with instructions to follow-up on what they concluded was a virus in his small intestine. A day later he was whisked into surgery. He almost died. When the Colorado doctor learned Fogall had been given antibiotics, he told his patient those drugs had masked symptoms of the diseased appendix. Without them he might have had surgery sooner.

Eventually Fogall made a full recovery. "I now have a \$12,000 hospital bill, and I'm responsible when the hospital screwed up," Tammy Fogall said. The Veterans Administration covered their Ohio medical bills while a Blue Cross Blue Shield plan from her husband's employer paid for most of the Colorado hospital's \$75,000 bill. What they still owe is the result of a \$4,250 deductible and the requirement to pay 20 percent of their remaining bills after satisfying the deductible. Fogall, who sells ads

Fogall, who sells ads for the Colorado Business Journal, pays the hospital \$100 a month. "That's all I can afford," she says. The hospital has sent the account to collections.

Like most victims of medical errors, Fogall consulted several attorneys - 20 or so by her count. They all said it would cost more to fight the hospital than pay the bill. Her case was too hard to prove, they told her.

I rang up Helen Haskell whose son died from a medical mistake in a South Carolina hospital many years ago. Since then she has founded Mothers Against Medical Error to provide resources and advise families whose loved ones have been hurt by the healthcare system. Each year hundreds of thousands of Americans are harmed although no one knows the precise number.

Haskell says the legal system "exists for large claims, those involving hundreds of thousands or millions of dollars," and that puts people like Fogall in a bind even when their claims are justified. She added if the hospital has no interest in "doing the right thing," there's little the family can do.

Still, families can take certain steps when a loved one has been harmed. These include:

 Getting copies of the patient's medical records as soon as possible after the incident. That means doctor and nursing notes, lab results and digital imaging studies.
 Making sure the incident

is reported internally. Accredited hospitals are supposed to conduct a review called a root cause analysis and implement procedures to prevent harm. Try to have your version of events made part of the review.

• Ordering a forensic autopsy if the patient has died. Hospitals don't routinely conduct them, but Haskell says the family always has the right to have one.

• Considering calling an attorney even though the odds are against anyone taking your case. But an attorney may help you negotiate with the hospital.

 Meeting with hospital officials and the doctor. Talk to them about how they will learn from the incident to prevent harm to other patients. If your family member has suffered a disability or has died, try negotiating with the hospital to see if it will waive medical bills or negotiate a reduced level of compensation.

ompensation.
• Reporting the incident to regulators who can investigate and penalize healthcare providers. Contact the state health department; your state's state licensing boards for doctors and nurses; the Joint Commission, which accredits hospitals; Medicare or one of Medicare's Beneficiary and Family Centered Quality Improvement Organizations.

Fourteen years ago the Joint Commission announced a patient safety goal for hospitals: They should disclose "unanticipated outcomes" or medical harm to families. Studies show that when hospitals meet with families and apologize for their mistakes, families are more able to move on and reach a settlement. When medical providers circle the wagons, it's another story.

Hospitals know what they are supposed to do, says Haskell. "But so far most are not doing it."

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