

May 2019

The Siren

Newsletter of the Sun City Center
Emergency Squad

AMBULANCE

From the Desk of the Chief

At this time, a good share of the snowbirds have left. Like in past years, this puts a real gap in scheduling our teams. Every year we think we won't be able to get through it, but we do.

We just finished the spring health symposiums, and in 2 presentations we had about 800 people attend. Thanks again to all that helped with registration, food service and generally assisting with the event. These events were designed to help our community understand their health and extend their quality of life. There are other topics we need to discuss, but some are difficult subjects. Makes you really want to have a conversation with the person that came up with the term "golden years"! Helping the community is what the Squad has done for many years, this is just another avenue.

Hurricane season is just around the corner. People make their decisions to stay or leave, for different reasons. As you have heard me say before, Shirley and I have decided to stay because we believe we can be of help to the community. If you wish to leave, you will probably need to do so at least 3 days prior to the event. You need to consider housing, food, gas and their availability. Please let your Captain know if you are staying or leaving. After the event, we will check on those that stay.

We are not in an evacuation zone so the county does not provide shelters for us. The county has come up with a plan to make it easier to prepare for a hurricane on a budget. There is a disaster kit checklist that provides a list of items to purchase each week, over a 13 week period. These available at the front desk this week.

"Last Friday morning, I fell, at home, and had to make my second call to the Emergency Squad for help. I am 90 years old and a 22 year resident of Sun City Center. I have been a regular supporter of the Squad, But Friday's call for help produced a response that was perfection, and deserves more than a thank you.

Please accept my additional donation to the Squad and thank the team which provided such outstanding service."

A happy "customer"

proud and humbled at the same time, by the enormous generosity of our volunteers.



Chief Mike Bardell

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SUN CITY CENTER EMERGENCY SQUAD



UPDATES & REPORTS

May Birthdays

Pat Harkins	2	Robin Watt	11
Barbara Wright	2	Meryl Guzinsky	15
Barry Bogart	3	Carol Pliska	15
Carolyn Cole	3	Giselle Blankenship	16
Linda Kalpin	3	Valerie Graves	17
Robert Lucas	3	Nancy Jardine	17
Janice Ryder	3	Robert Leonard II	18
Robert Guzinsky	4	Linda Dulik	20
Edna Fleming	7	Merrill Pritham	20
Cody Fernandez	8	Teresa Rowe-Wilson	22
Carl Hansen	8	Carolyn Clark	23
Jeanne Miller	8	George Ineson	23
Sharon Crabtree	9	Cindi Russell	24
Naomi Layton	9	Deborah Spitler	30
Phil Parker	10		
David Watt	10		

Celebrate

Anniversaries Team#/ Years

Carl Hanson	radio	10
Carol Culp	adm.	3
Marilyn Navarro	1	3
Chris Avella	1	10
Lillian Stone	1	5
Ellen Turner	1	1
Mary Jane Marotta	1	1
Donna Lewis	2	1
Louise Crandell	2	1
Victoria Petersen	3	1
Lorraine Germain	4	10
Winifred Hicks	4	10
Michael Brannen	5	5
Irv Sanders	5	10
Linda Bedrin	6	5
Randy Allen	6	1
John Allen	6	1
Robert Jensen	6	3
Edward Cohen	7	3
Rosie Divish	7	10
Kathy Panzner	7	5
Jack Schneider	8	1

Squad Stats

Run Reports

Amb. Runs	407
Van Runs	123
Fall Calls	180
Blood pressures	163
YTD runs	1630
Falls % =	44.2%

Sick List

Bob Kratzer	T-1
Dana Wallace	T-1
George McInnes	WM
Sally Mabeson	T-7
Linda Williams	T-7
Mark White	T-8

Behind the Scenes - The Deputy Chief

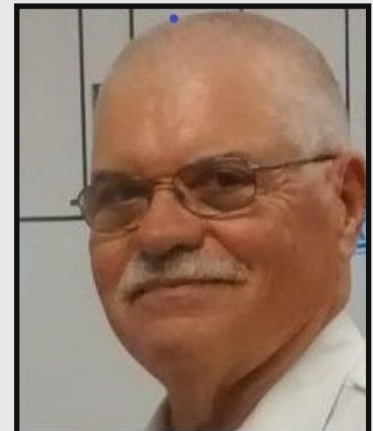
The Deputy Chief is appointed, with the consent of the Board, to assist the Chief Executive Officer (Chief) with the day to day administration of the policies and general business decisions made by the Board. The Deputy Chief is also responsible for the appointment of Team Captains who serve at the Deputy Chief's direction and pleasure. That's the description in the policy manual.

With our current shared responsibilities, the Deputy Chief is responsible for Operations. Guiding Teams and Captains and interfacing with other Assistant Chiefs to accomplish that overall goal, including Safety, Maintenance, HR, PR, IT, Education, Medical, Procurement, CFO, HIPPA and, of course, the Chief of the Squad. Given all the interactions, the day to day activities constantly change. Most of the job is dealing with decision making and problem solving. It never gets boring. Some days it involves making sure there is enough soda in the machine; other days it is resolving personnel issues.

Defining any of our roles in a Policy Manual is difficult because it changes from day to day, depending on whatever happened the day or night prior. If anyone is considering becoming the Deputy Chief someday, feel free to stop in for further discussion.

Side Note:

And as if he doesn't have enough to do, Jim is also an EMT on Team 8. He joined the Squad in December of 2004, and has served the Squad in multiple capacities, often at the same time. Jim is married to Grace Ryan, who has been with the Squad almost that long. Grace is a dispatcher, also on



Our People & News You Can Use

Hipaa Tips

Last month we reviewed a few situations to determine whether or not Hipaa violations may have occurred. This month we want to bring your attention to the fact that often, there are people on scene, at the patient's home, when we arrive. Most of the time, we assume that these people are family, caregivers or friends that the patient wants there.

But we should ask, "Are these neighbors? Are they relatives? Do you want them to know your medical situation?"

Often the outsiders begin volunteering information about the patient, which leads us to believe they are family. Depending on the patient's mental capacity, we should verify anything the bystanders say – if it's relevant to the situation. Still, it's worth asking the question of whether they are family, first to the patient, and then to bystanders, if necessary.

If the patient doesn't want the people in their house to be party to their health information, then one of our crew should politely ask them to step outside. Any people gathering outside that ask questions on our way out the door with the patient, should be ignored if they ask anything. Please tell them to ask the patient or the family.

Be sure to document your efforts to protect their PHI if the situation is beyond what we normally encounter.

amazonsmile

SUMMER HEAT EMERGENCIES

Heat stroke and heat exhaustion are the most serious heat emergencies of summer. Although they can occur year round here in Florida, they are more likely to occur in late Spring through Summer until our weather begins to cool and the days get shorter.

Recognizing the symptoms of heat stroke and exhaustion is important – not just for our patients, but for ourselves. While symptoms may vary slightly from person to person, heat stroke, the most serious heat emergency, most often includes very hot, **DRY** skin, confusion, rapid heart-beat, dizziness or loss of consciousness and a very high body temperature, nausea and or vomiting and headache.

Heat exhaustion is also quite serious, and has many of the same symptoms. The biggest difference is that with heat exhaustion, the patient will be sweating profusely.

Although heat exhaustion isn't as serious as **heat stroke**, it isn't to be taken lightly. Without proper intervention, heat exhaustion can progress to heat stroke, which can damage the **brain** and other vital organs, and even cause death.

If we are responding to a call for potential heat emergency, we follow our protocols. But if you are home or at a neighbor's house, call 911 and then proceed to get the person into a cooler environment. Remove unnecessary clothing, have them drink cool or cold water, cool their skin with either ice packs or cool damp towels. If emergency response is delayed, call the emergency room for additional instructions.

The best way to prevent health issues from heat exposure is avoid working outside in the middle of day; take frequent breaks inside or in the shade; stay hydrated; wear loose fitting clothes that "breathe;" and wear a hat. Too often people don't recognize their own symptoms before they begin to suffer the effects of the heat. Use the buddy system with your spouse or if you live alone, let a neighbor know you're working outside.

Stryker Training/ Back Safety

In mid-April, our Stryker representative came in for training on the operation of our gurneys. Amanda McBride showed us all the levers, handles and buttons to push to ensure proper gurney operation. She also provided valuable tips on how to utilize the equipment safely for our patients and ourselves. The features of the Stryker gurney allow us to lift heavier patients safely.



The Squad is also looking at various devices to assist in moving our patients from bed to gurney to hospital bed with less effort on our part. Information on which device we choose will be highlighted in a future article.

Squad in the Public Eye

By Robin Watt, Asst. Chief, Public Relations

Volunteering with the Squad is, for many people, a very satisfying volunteer opportunity. We hope that all our volunteers feel that way. If you like, or even love, what you do with us – please share that with your friends and neighbors. Here are a few points you can also share:



- We are all FREE, all the time. No one has ever gotten a bill from the Squad.
- Everyone is a volunteer – no one has ever gotten a paycheck.
- The Squad will be 55 years old in September and was here in the community before the Fire Department or the Hospital, Brandon Hospital or I-75.
- We run approximately 5000 ambulance runs a year and another 1100 van runs.
- Our “loaner closet” of wheelchairs and walkers makes over 1000 equipment loans a year.

The average age of our volunteers is 70 years old.

And finally, the benefits of volunteering are numerous:

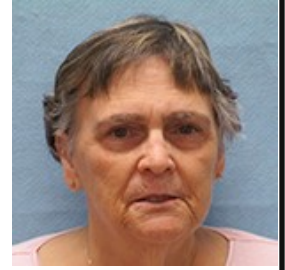
- Make new friends;
- Learn new skills;
- Have meaningful and rewarding “work” efforts;
- Belong to a special, highly regarded group;
- Feel a true sense of community.

Everyone has their own reasons to volunteer and this may not always be a perfect fit for everyone. But encourage your neighbors to come check us out. Our Volunteer information meeting is the 2nd Wednesday night of the month at our training building at 6PM. The address for that building is 124 S. Pebble Beach. Or they can come by the Squad and fill out an application and talk with Chris McCann, our Asst. Chief of HR.

Safety for All—Backing Up

By Bev LeDoux, Asst. Chief, Safety

There are many times that backing up the ambulance requires having one of the crew members assist. Please remember if you are assisting the driver in backing up the ambulance:



- Put on your green safety vest first, before you step into the street.
- Assess traffic, be sure they see you before you step into the road to back up the vehicle. Make eye contact if possible, with the drivers closest to you.
- Make sure all traffic stops before you signal the driver that it's clear to back up.
- Make sure the ambulance driver can see you in his mirrors so you don't become a patient!
- Keep an eye on traffic to make sure they don't try to sneak around you and the ambulance.
- Study and review our training on hand signals for spotters.
- Most of all – be sure YOU are safe from being injured!

Keep each other safe – you are our most valuable assets!

TOUGHBOOK TIPS by Merrill Pritham Asst. Chief of QI

A few tips for your patient care reports, as well as your assessments.

- All falls require a blood sugar
- We do not "monitor" our patients, we "observe". Monitoring implies using a cardiac monitor which we don't, that is ALS.
- If you see blood, it is a hemorrhage, not a sick person.
- If the patient has abdominal pain, use "pain" then "abdominal pain" not "sick" or "no other choice".
- Record pain scale for all pain listed as chief complaint.
- GI means gastro-intestinal. Impacted bowels or constipation or diarrhea are all GI problems.
- Make sure the final status of your patient is not "dead".



Lastly, please don't fold, spindle, or mutilate the HIPPA forms. It is not helpful to staple them to anything either.

Team Captains

- Team 1 Robert Leonard**
- Team 2 Betty Richner**
- Team 3 Chuck Russ**
- Team 4 Tim Zion**
- Team 5 Ken Rodman**
- Team 6 Dick McCormick**
- Team 7 Tina Drury**
- Team 8 Tom Burlage**



Check our website at
SCCEMS.com