

The Villages®

Public Safety Department



*Getting to Know Your
Fire-Rescue Service*

*Frequently Asked
Questions and helpful information*

A Message from the Fire Chief:



Fire Chief Edmund A. Cain

The American fire service continues to demonstrate its ability to meet a diverse set of circumstances and situations. The reality is that the expectations of the various communities we serve are high at times, and the perceptions of what we do, and how we do it is as varied as the communities we serve. In each and every occasion, the staff of the VPSD has risen to the occasion and has continued to deliver high quality service.

I am proud of the staff and the service they have delivered. The VPSD has become known as an organization that continually delivers high quality patient care and customer service in all aspects of the job performed by VPSD personnel. It is an honor to lead this group of professionals.

Please take the time to review the information contained in this brochure and use it as you need it. It is a great reference tool that we periodically update. If you need more, you may go to the District website www.districtgov.org where there is a wealth of information for the entire District as well as specifically for public safety. As with any documentation, questions can be raised. I ask that anyone having questions contact me or one of my various staff members for further clarification.

Respectfully,



Edmund A. Cain
Fire Chief

VPSD Mission Statement:

*With respect and dignity,
The Villages Public Safety Department
will work to prevent harm, and respond to unprevented
incidents in an efficient and effective manner with the best
resources provided by the community, and
be nice!*

Frequently Asked Questions...

When I dial 911, which fire station answers my telephone call?

Actually, your 911 phone call isn't answered at any of The Villages Fire Stations. It is answered at a Public Safety Answering Point for 911, or PSAP for short. The call-taker will ask a few, simple questions about your emergency and, if it is either fire or medical in nature, the call is immediately transferred to the dispatch center for Villages Fire Rescue. This center is part of Lake Emergency Medical Services. It is the personnel at LEMS that dispatch Villages Fire to your emergency.

If I have a medical emergency, why does a fire truck come to my house?

Like many fire departments in America, The Villages Fire Rescue purchases "medical engines," fire trucks that are capable of doing both fire and EMS work. This gets us the "biggest bang for our buck." Fire trucks are a big-dollar item, frequently \$300,000 or more. In order to justify that type of cost, the truck has to be used. Running both EMS and fire calls gets us the best value for the dollar spent. Also, each of these "medical engines" has the same equipment as an ambulance, except for the stretcher, and every medical engine is staffed with at least one firefighter/paramedic and one firefighter/EMT.

What types of calls do Villages Fire personnel respond to?

Based upon call volume, Villages Fire is on track to respond to almost 10,300 emergency calls in 2010-2011. Approximately 20% of our calls are fire or service related, while 80% are medical. Those fire calls can be as simple as a chirping smoke detector or as serious as a house fire. On the medical side, well over half of our calls fall into five groups: falls, cardiac, dizziness or fainting, difficulty breathing, or general weakness. Basically, we've seen it all and are prepared to handle it all!

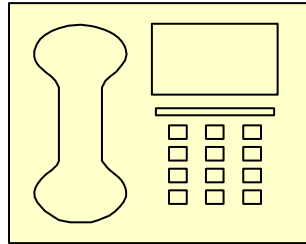
I've heard that The Villages Fire Department has an average response time of four minutes, but when I called a few weeks ago, it took longer for rescue personnel to arrive. Why?

You're right about Villages Fire Rescue's average response time, but that's an average. We, as drivers, face the same problems you face every time you get behind the wheel of your car: traffic, weather, detours, delays, and a whole lot more. Certainly weather is a big factor, but we also face irresponsible drivers who won't yield the right of way even when the siren is blaring and the emergency lights are on. Travel distance is also a factor. You may live right next door to the fire station, but the crew could be several blocks away treating another patient. In that case, personnel from another station will be dispatched. That may mean additional travel time. In any event, rapid and safe response is a priority for every Villages firefighter.

How is each of the fire stations staffed in The Villages?

The Villages has seven fire stations. (They are listed on the back of this flyer.) As The Villages has grown, the Fire Department has also grown to keep up with development. Our stations are located so that response times are kept to a minimum. Some of the stations are staffed with two pieces of apparatus (a rescue or attack vehicle and a medical engine) and two, three or four firefighter EMT's or paramedics. Every station has at least one firefighter/medic and one fire-fighter/EMT. Staffing is done based upon call volume and coverage area.

What Happens When I Call 911 in The Villages?



What is EMD?

EMD is Emergency Medical Dispatching. If you are dealing with a medical emergency, the call-taker may give you information on how to help the patient: how to stop bleeding, how to deal with a patient who is unconscious, how to perform CPR. EMD helps you to help the patient.

What else should I know?

There are several things that may make your 911 call less distressing, frantic, or frustrating:

- If you are incapacitated and cannot get to the door to let the EMT's and paramedics in, tell the dispatcher. Is there a "hidden key?" Is there another means of entry? Give instructions as to how you want the emergency responders to get in.
- If you have pets, and can put them in a secure room, do so for their own safety and the safety of the emergency responders.
- Can the emergency responders see the house numbers for your home? Are the outside lights on? Can you give the call-taker any information that will make it easier for emergency personnel to find you?
- Yes, you have an emergency but be patient! The call-taker and/or dispatcher can only perform his/her function if you remain calm and can provide the necessary information. There will be lots of questions. Sometimes the same questions get asked several times. The call-taker is merely trying to get needed information and insure that the information is accurate.
- When in doubt, call 911. If the situation upsets or scares you enough to "think" it's an emergency, it probably is. Call 911. The call-taker can make the decision.

When should I call 911?

When you have a medical, fire, or police emergency. If the situation seems urgent or has the potential to become dangerous, call 911. Call-takers or dispatchers will determine whether your call should be handled by 911 or can be transferred to another person or agency.

Who answers my 911 call?

In Florida, all 911 Public-Safety Answering Points (PSAP's) must be affiliated with law enforcement dispatch centers. So, if you live in the Sumter Villages, your call is originally answered in Bushnell by the Sumter County Sheriff's dispatch center. In Marion County, you'll be talking to an individual in Ocala. Lake county residents get a call-taker in Tavares or Lady Lake.

But I don't need the police. What if my emergency is medical?

The law enforcement office call-taker will ask if your call is for FIRE, POLICE, or MEDICAL. The call-taker will also ask for the location of the emergency. Frequently, the call taker will ask for the county. By doing so, the call can be transferred to the appropriate jurisdiction. If the call-taker has the exact location, he/she can more quickly transfer your call to the appropriate agency. Remember, you may be talking to a call-taker several miles away. Telling the call-taker that the emergency is in The Villages may not work. For the purposes of 911, you need to know the COUNTY, YOUR ADDRESS, or CLOSEST CROSS STREETS to your location.

Doesn't the 911 operator know my address when I call? Why does he/she have to ask?

If you call 911 from your hard-wired (house) phone, the location of that telephone appears on the call-taker's computer screen. It also gives your phone number as well as information about your primary police service, fire service, EMS service, and ambulance service. If you call from your cell phone, none of that information may be available. The call taker will always ask for the location of the emergency either to confirm what he/she already sees on the screen or to learn the location from the cell phone caller. As a result, if you're calling from a cell phone, you need to know the COUNTY, YOUR ADDRESS, or CLOSEST CROSS STREETS to your location.

When I call 911 from The Villages, do I ever talk to someone at a Villages fire station?

Not when you call 911. If you are a Lake County Villages resident, your 911 call is transferred to Lake Emergency Medical Services in Mount Dora. All Villages Fire Department stations and apparatus are dispatched by staff at the Lake EMS communications center. If you are a Sumter resident calls are answered by Sumter County Sheriff's Office in Bushnell. If you are a Marion Villages resident, your request for medical or fire assistance will be transferred to Marion County Fire dispatch in Ocala. MCFR provides the primary emergency medical and fire service in The Marion Villages. Villages Fire-Rescue also responds to all Marion Villages calls.

How long does all of this take?

The average 911 call only takes about 30 seconds until help is dispatched. Of course, that time is dependent upon you - the caller - knowing where the emergency is. If you don't know the address, the call-taker can't send help!

What if I have my telephone service through my computer?

Originally there were a number of problems with Internet 911 calls. Those "problems" have been resolved, but the call-taker may not have all of the same information that is provided by the normal hard-wired (house) phone. Be prepared to answer questions!

Hurricane Personal Preparedness:



Before the storm hits...

Don't wait...

It's human nature to put things off. We all tend to do it. But when it comes to preparing for a hurricane, you can't wait. When the weather forecasters start talking about an impending storm, water, batteries, food, and other essential items start flying off of store shelves. Make plans now. Gather the items for your disaster supply kit today! Don't wait until it's too late.

Have a plan!

Evacuate or stay put? Sure, every situation may be different, but have a plan set. If you are going to evacuate, know where you are heading. Remember, lots of people will be heading in the same direction. If you're going to stay, do you have a "safe room" prepared in your home? How about a shelter? In the event of a disaster such as a hurricane, The Villages High School and/or Middle School may be opened as shelters, and the Villages Elementary School on Rolling Acres Road is a "pet-friendly" shelter. Be prepared before disaster strikes.

Personal Preparedness Checklist:

- ✓ Develop disaster and first aid supply kits
- ✓ Store loose out-door patio items / furniture
- ✓ Prune trees or weak / dead branches
- ✓ Place vital documents in waterproof containers
- ✓ Remove and secure valuables
- ✓ Develop a plan for handling your pets!
- ✓ Register physically challenged persons with the appropriate emergency management offices
- ✓ Register with your county emergency notification system:

- a. **Sumter County Residents** - <http://www.sumtercountyfl.gov> for the code red link
- b. **Lake County Residents** - <http://alertlakecounty.com/>
- c. **Marion County Residents** - <https://cne.coderedweb.com/Default.aspx?groupid=rnHTOODAA0lCtQVIGOctEw%3d%3d>

This system allows each county to telephone all or targeted areas of the County in case of an emergency situation that requires immediate action (such as a boil-water notice, missing child or evacuation notices). It delivers a recorded message to a live person or an answering machine, making three attempts to connect to any number.

THIS SYSTEM WILL ONLY BE USED FOR EMERGENCY PURPOSES!

If you receive a message:

- * Listen Carefully
- * Follow Instructions
- * Don't hang up until you hear the whole message
- * DO NOT call 9-1-1 unless instructed

- ✓ The purchase of a programmable weather radio: (For the hearing impaired, additional accessories are usually available through the manufacturer of the unit. A strobe light attachment will let you 'see' an alert or emergency warning as it comes in.)
 - a. Channel 5 - 162.500 MHZ.
 - b. SAME Codes:
 - i. Sumter - 012119
 - ii. Marion - 012083
 - iii. Lake - 012069

It is recommended that you select and set only ONE county code, the county you live in. If you are unable to set your weather radio, you may go to any of The Villages Fire Stations listed on the back of this brochure and they will be happy to program your radio. Please make sure that you purchase batteries for your unit and change the batteries as you would change your smoke alarm batteries.

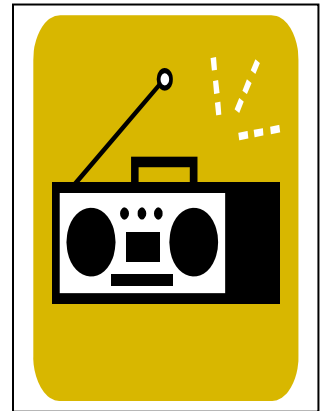
- ✓ Become familiar with the area's disaster plan and evacuation routes
- ✓ Prepare a safe room in your house
- ✓ Set a family rallying or meeting point

- ✓ Make an inventory of your home's contents - photos or video tape. Collectables need special attention!
- ✓ Check your insurance coverage. Is it adequate?
- ✓ **Develop a communication plan with relatives and friends NOW!**
- ✓ **CASH!** Make sure it's small bills.



Disaster Supply Kit:

- Prescription medications
- Basic first aid kit
- Cell phone with charged battery
- Non-perishable food
- Toiletries, hygiene supplies, toilet paper
- Drinking water / containers
- Flashlight and **batteries!**
- Portable radio and **batteries!**
- Plastic plates, dinnerware, cups
- Utensils / manual can opener
- Tarps / heavy-duty plastic or canvas
- Basic tool kit
- Trash bags
- **Duct tape!**
- Variety of containers and lids
- Clothing and rain gear
- Cash → small bills only!
- If pets: food, meds, leash, carrier, etc.
- **What can't you live without?**



Take some time and **think!**

Staying in Touch

Stay in touch with emergency officials

Following a hurricane, staying apprised of information via local radio and television stations is essential in helping your family recover. Remember, websites are also an important link. Check out the websites before an emergency so that you know how to get the information you need. Listed below are some of the links the public has to the latest post-hurricane information.

Telephone

Lake County Citizens Information Line

(352) 253-9999 to get up-to-date information.

Online

www.lakecountyfl.gov

www.marionso.com

www.sumtercountyfl.gov

Radio

WLBE 790 AM — WLBE, of Leesburg, broadcasts a remote feed from the Lake County EOC.

WVLG 640 AM — WVLG, of The Villages, also broadcasts to many Lake, Marion & Sumter County residents.
Ocala WOGK 93.7

Television

Government access stations: Bright House channel 99; Florida Cable channel 4. Lake-Sumter Community College Television (*Comcast cable channel 13*) and LakeFront TV (*Comcast cable channel 22*) air news conferences from the Lake County EOC on all government access channels.

Network television stations: Regular updates can be seen on:

NBC affiliate WESH-TV channel 2

CBS Affiliate WKMG-TV channel 6

ABC affiliate WFTV-TV channel 9

FOX35 channel 35

Central Florida News

13 (*Bright House Network cable only*).

Newspaper

Daily newspapers: *Lake Sentinel*, *The Daily Commercial*,
The Villages Daily Sun, *Ocala Star-Banner*

Sheltering for Special Needs Persons



What are special needs?

According to House Bill 7121 passed during the 2006 State Legislature, special needs is defined as "persons who would need assistance during evacuations and sheltering because of physical, mental, cognitive impairment, or sensory disabilities."

The bill further states: "Each local emergency management agency in the state shall maintain a registry of persons with special needs located within the jurisdiction of the local agency." Make a plan **now**. For further information on personal planning, go to www.floridadisaster.org

How will I know if I meet the requirements for special needs?

You will need to contact the county Emergency Management Office for the county in which you live. Each county has its own evaluation process and special needs application.

Lake County Emergency Management

Phone: (352) 343-9420

Website: www.lakecountyfl.gov

Marion County Emergency Management

Phone: (352) 622-3205

Website: www.marionso.com

Sumter County Emergency Management

Phone: (352) 569-1660

Website: www.sumtercountyfl.gov

When should special needs individuals shelter at a County facility?

If a resident with special needs lives in a manufactured home and has **not** made evacuation plans with family members or friends, sheltering at a County facility is recommended.

Due to the lack of comfort at a County facility, special needs residents are strongly encouraged to seek shelter at a site-built home of a family member or a friend.

What will the accommodations be like at the County special needs shelter?

While special needs shelters are high on safety, residents may find the comfort level more accommodating in the site-built home of a family member or friend. Special needs shelters do not have neither the proper facilities for special dietary considerations nor do they have a surplus of nurses on duty. All special needs residents sheltering at a County facility should be accompanied by a primary caregiver.

What are some of the suggested items that I should bring to a shelter?

If you decide to evacuate from your residence — or if authorities advise you to evacuate — take only items that are essential to you. While all the items in a shelter survival kit are essential, the most important item for individuals with special needs is their medications (at least two weeks worth of those meds). Individuals with special needs should also have any medical equipment and supplies you use at home (*i.e. nebulizers, adult incontinence pads, dietary products, etc.*) Other items include:

Blankets, pillows and sleeping bags
Basic toiletries (*toothbrush, deodorant, toilet paper, etc.*)
Extra clothing
Battery-operated radio and flashlight
Personal items, including books and magazines
Important papers, such as valid identification

STROKE:

A little knowledge can help!

Stroke: What is it?

Damage or death to a part of the brain caused by a lack of blood and oxygen to that portion of the brain.

This is caused by:

- ⇒ **A clogged vessel:** Ischemic stroke
- ⇒ **A burst vessel:** Hemorrhagic stroke

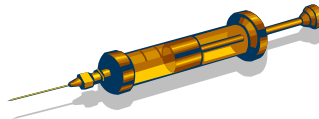
Stroke Risk Factors:

Risks you CAN'T control →

- ✓ Increasing age
- ✓ Male sex
- ✓ Race
- ✓ Family history of stroke
- ✓ Previous history of stroke

Risks you CAN control (or attempt to control) →

- ✓ High blood pressure
- ✓ Diabetes
- ✓ Cigarette smoking
- ✓ High blood cholesterol
- ✓ Obesity
- ✓ Heart disease



Why should I be concerned?

- Stroke is the 3rd leading cause of death in America behind heart disease and cancer.
- 700,000 strokes annually
- 165,000 stroke deaths annually
- Stroke is a leading cause of long-term disability in America
- Stroke has an annual price tag of over \$50 billion. What will your insurance cover?
- Stroke not only kills, it often ruins the quality of life for survivors and care-givers.

Recognizing a STROKE!

If you think someone is having a stroke, perform a simple 3-step test:

1. Ask the individual to smile - a BIG smile! Is there any facial droop? Is the smile even?
2. Have the individual close his/her eyes and raise both arms and hold them out. Does either arm "drift" downward?
3. Ask the individual to say: "You can't teach an old dog new tricks." Is the speech crisp and clear? Is there slurring of words?

If the answer is YES to any of the questions above,

CALL 911 IMMEDIATELY!

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Why the rush?

TIME IS BRAIN!

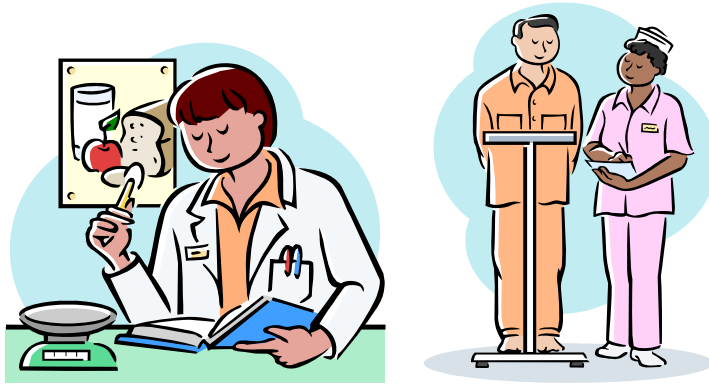
Rapid intervention / treatment is the key to success, especially if "clot-busting" drugs can be used.

You can't wait!



Reduce your risk of a stroke

- Have an annual physical
- Eat a healthy diet
- Be aware of family history
- Maintain a healthy weight
- Quit smoking
- Check blood pressure regularly
- Check your cholesterol levels
- Exercise
- If you are diabetic, manage blood sugar levels
- Take your medications



Stroke Prevention Begins with **YOU!**

A little knowledge can help!

Dealing With Chest Pain

Acute Coronary Syndrome

Once Upon A Time...



A resident, approximately 72 years old, is out working in his yard, doing what he loves the most – gardening. While planting some new flowers, he begins to experience some chest pain. Well, it's not really pain, it's more like pressure. Like he has a weight on his chest. Because it's not too bad, he continues with his gardening because he simply has to get these flowers in before it's too late. The pressure continues, but now it's gotten worse. In fact, now he's sick to his stomach, and has begun to sweat – a lot.

He decides to call it quits and goes into the house. As he comes in the door, his wife takes one look at him and asks what's wrong. He reassures her that he's okay, that he just has some pressure in his chest and that he feels sick to his stomach. She asks how long this has been going on and he tells her about 40 minutes. She tells him that he is very pale, really sweaty, and that she's going to call 911. He immediately protests and says that he will be okay; he just needs to rest for a while.

Being as obstinate as him, she ignores his protest and dials 911. She gives the call-taker the appropriate information, explaining that her husband is experiencing chest pain and nausea. She answers some questions and confirms the address. She is told that help was on the way and that it should be there soon.

Within 4 ½ minutes, Villages Public Safety paramedics arrive on scene and they tell the patient that they are there to help. Initially, the husband says that he's okay and that all he needs to do is rest. The paramedic crew reassures him that they are just going to do a work-up to be sure that everything is okay. "Let's see what's going on."

A blood pressure is taken, a 4-lead and then a 12-lead EKG is done on scene, a history is taken, and the patient's medications are noted. Based upon the EKG, the paramedic crew informs the patient that he may be having a heart attack – a myocardial infarction – and that they want to start an IV and administer some medication. They are also going to declare a "cardiac alert" and transmit the EKG to The Villages Regional Hospital for evaluation.

The patient is easily convinced that he needs treatment since his pain is now 7 on a 1-10 scale. He readily consents to the paramedics' intervention. The medics administer aspirin and a nitroglycerin tab and place some nitro-paste. An IV is started and the EKG is transmitted. Because the ambulance is on scene, the patient is quickly transferred for transport. Because the pain isn't going away, the medics administer some pain medication to make the patient more comfortable.

At The Villages Hospital, the EKG alarm sounds, and staff realize that they are receiving an EKG from a "cardiac alert." The ER doc evaluates the EKG – with the new technology the EKG transmitted from the field is of superior diagnostic quality – and quickly determines that the patient's EKG is a "STEMI" – an EKG indicating an active heart attack.

When the patient is wheeled into the ER, the physician and his staff do a quick evaluation and immediately send the patient off to one of the hospital's two cath labs. The specialized "cath lab team" takes over from here and the patient is whisked through the process, and the patient undergoes percutaneous coronary intervention (PCI) and has two stents placed in order to open blocked coronary arteries. Two days later, a pain-free patient is released from the hospital and returns to a normal Villages life.



A modern-day "fairy tale?" Absolutely not. This is the type of scenario and treatment that occurs every day in The Villages. Because of the cooperation between Villages Public Safety and The Villages Hospital, this type of care is not only readily available; it has been used successfully over and over. The Villages Public Safety Department and The Villages Health System are dedicated to guaranteeing that our residents receive the best possible cardiac care.

What Is Acute Coronary Syndrome (ACS)?

For many patients, ACS is a heart attack, or the precursor to one. Patients present with a number of symptoms:

- ✦ Chest pain, pressure or tightness or pain similar to heartburn
- ✦ Pain in other parts of the body such as a shoulder or jaw
- ✦ Nausea and/or vomiting
- ✦ Shortness of breath
- ✦ Sudden, heavy sweating
- ✦ Lightheadedness, dizziness, or fainting
- ✦ Unusual or unexplained fatigue



What Should I Do If I Experience ACS?

If your symptoms last more than ten minutes, do not delay: call 911. It may be indigestion or a muscle strain, **but it may be a heart attack**. Delaying care can make the difference between life and death!

I'll Just Have My Spouse Drive Me To My Doctor...

While your personal doc may be an exceptional physician, he doesn't have the capabilities to effectively deal with an active heart attack in his/her office. By calling 911, you set a series of actions in motion that can insure you receive the best, most efficient care possible. Villages Public Safety and The Villages Hospital work hand-in-hand to guarantee you get highest level of care.

What Are "Coronary Angioplasty" and "Stents?"

Coronary angioplasty (AN-jee-o-plas-tee), also called percutaneous coronary intervention (PCI), is a procedure used to open clogged heart arteries. Angioplasty involves temporarily inserting and blowing up a tiny balloon where your artery is clogged to help widen the artery.

Angioplasty is often combined with the permanent placement of a small wire mesh tube called a stent to help prop the artery open and decrease the chance of it narrowing again. Some stents are coated with medication to help keep your artery open (drug-eluting stents), while others are not (bare-metal stents).

Angioplasty can improve some of the symptoms of blocked arteries, such as chest pain and shortness of breath. Angioplasty can also be used during a heart attack to quickly open a blocked artery and reduce the amount of damage to your heart.

REMEMBER: CALL 911 IF YOU EXPERIENCE ANY OF THE SYMPTOMS ABOVE. IT CAN SAVE YOUR LIFE!

Preventing Falls Among Seniors

The Problem...

For the past several years, falls have been the number one emergency for The Villages Public Safety Department. In 2006 the Department ran on 381 calls due to falls. In 2007 the number jumped to 459. We responded to nearly 500 falls in 2008. Fortunately, most people suffer only minor injuries, but for a significant number of people, falls can be life-altering. Without a doubt, falls are a real problem!

What can YOU Do to Prevent Falls?

Falls are not just the result of getting older. Many falls can be prevented. Falls are usually caused by a number of things. By changing some of these things, you can lower your chances of falling.

You can reduce your chances of falling by following these simple tips:

1. Begin a regular exercise program.

Exercise is one of the most important ways to reduce your chances of falling. It makes you stronger and helps you feel better. Exercises that improve your balance and coordination (like Tai Chi) are the most helpful. Lack of exercise leads to weakness and increases your chances of falling. You're never too old for exercise! Ask your physician or health care worker about the type of exercise program that is best for you.

2. Make your home safer.

About half of all falls happen in the home. To make your home safer:

- ❖ Remove things that you can trip over (such as papers, books, clothes, and shoes). Keep areas where you have to walk clear.
- ❖ Remove small throw rugs or use double-sided tape to keep the rugs from slipping.
- ❖ Keep items you use often in cabinets you can reach easily without using a step stool.
- ❖ Have grab bars put in next to your toilet and in the bath or shower.
- ❖ Use non-slip mats in the bathtub and on shower floors.
- ❖ Improve the lighting in your home. As you get older, you need brighter lights to see well. Lamp shades or frosted bulbs can reduce glare.
- ❖ Have handrails and lights put in on all staircases.
- ❖ Wear shoes that give good support and have thin, non-slip soles. Avoid wearing slippers and athletic shoes with deep treads.

3. Have your health care provider review your medications.

Have your doctor or pharmacist look at all of the medicines you take (including the ones that don't require a prescription). As you get older, the way some medicines work in your body can change. Some medicines, or combinations of medicines, can make you drowsy or light-headed which can lead to a fall. Medicines should help - not hurt!

4. Have your vision checked!

Have your vision checked by an eye doctor. You may be wearing the wrong glasses or have a condition such as glaucoma or cataracts that limits your vision. Bifocals or trifocals can make stepping up on a curb (or stepping down) a lot more difficult. Poor vision can increase your chances of falling.

5. How about some help?

Don't be afraid to ask for help, particularly if you are walking in an unfamiliar location. Taking an out-stretched arm may be just the ticket! But remember, you may need regular assistance such as a cane or walker. If that's the case, be sure to have the cane or walker "fitted." In order for the cane or walker to be of benefit to you, it must be at the right height and able to support your weight. Learn how to use your cane or walker. You've got it to help you. Make the most of it!

If necessary, CALL 911

If a fall occurs, don't hesitate to call 911. The Villages Public Safety Department paramedics and EMT's stand ready to help you when you call. Make sure to get checked out. It's better to be safe than sorry. You've heard it before:

**An ounce of prevention is
worth a pound of cure!**

Do You Have An Advanced Directive?

Living Wills Health Care Surrogates Do Not Resuscitate Orders

How do I make a Living Will or designate a Health Care Surrogate?

There are several sites on the Internet that will allow you to download the appropriate forms to make a Living Will or designate a Health Care Surrogate. While you do not need an attorney to prepare either a Living Will or Designation of a Health Care Surrogate, you should consider consulting your attorney to insure that your rights are properly spelled out in each document.

Do I need to have my Living Will or Designation of a Health Care Surrogate notarized?

No. You must have two witnesses who sign your completed form. Both witnesses must also include their home address.

How do I get a Do Not Resuscitate Order?

Because a DNRO is a physician's order, you must see your primary physician. He/she should be able to provide the proper forms. You can also down-load the forms from the Internet. Remember, the original and any copies MUST be printed on yellow paper.

How do I cancel or change an advanced directive?

It is your right to modify or cancel an advanced directive at any time as long as you are considered of sound mind to do so, whether it is a Living Will, Designation of a Health Care Surrogate, or a Do Not Resuscitate Order. Be sure to let your doctor and family know of any changes or cancellation. Destroy all copies of the old advanced directive.

Where can I find more information on Florida Statutes and Administrative Codes on "end-of-life" issues?

Chapter 765 and Chapter 401.45, Florida Statutes address end-of-life issues. Chapter 64E-2.031, Florida Administrative Code addresses the Do Not Resuscitate Order. Both can be accessed via the Internet. Your attorney can also assist you.

What Is An ADVANCED DIRECTIVE?

Death and taxes. It's said that these are the only certainties in life. There is a difference, however. Everyone talks about taxes, or, more appropriately, everyone complains about taxes, but few of us willingly talk about death. Death, however, is one of those subjects that needs to be talked about, and long before death is at our door! Advanced health directives should be a part of that discussion.

An **advanced directive** tells your physician (or the paramedics who show up at your door) what kind of care you would like to have if you become unable to make medical decisions for yourself. Most advanced directives are written by older or seriously ill people. An individual with terminal cancer might write a directive that states that he does not want to be put on a respiratory if he stops breathing. Such an action can reduce suffering, increase peace of mind, and increase the patient's control over his death. Advanced directives describe the kind of treatment you would want depending upon how sick you are. In short, you get to make decisions about your health care before the health care crisis happens.

Advanced directives can take many forms, but in Florida there are three specific documents that every resident should consider: a Living Will, Designation of a Health Care Surrogate, and a Do Not Resuscitate Order. It's important to know the differences between these three and how they will be used.

The Living Will

A Living Will lets you state your wishes about medical care in the event that you have an end-stage condition, become persistently vegetative, or develop a terminal condition and can no longer make your own medical decisions. In short, you get to decide what medical care you will receive - or not receive - even if you cannot speak for yourself.

In a Living Will you may give specific instructions. For example, you may want to refuse specific treatments by listing those treatments. For example, a Living Will might state, "If at any time I am incapacitated and have a terminal condition, or have an end-stage condition, or am in a persistent vegetative state and if my attending or treating physician and another consulting physician have determined that there is no reasonable medical probability of my recovery from such condition, I direct that life-prolonging procedures be withheld or withdrawn when the application of such procedures would serve only to prolong artificially the process of dying, and that I be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary to provide me with comfort care or to alleviate pain."

It is important to understand that in Florida a Living Will is only effective if you are in a hospital or other health care facility. The paramedics who arrive at your home when you suffer respiratory arrest cannot follow the directions of your Living Will. They are required to resuscitate you, unless you have a Do Not Resuscitate Order (DNRO) in place.

And remember: You can revoke your Florida Living Will at any time you feel the document no longer reflects your wishes. You are in control.

DESIGNATION OF A Health Care Surrogate

The Florida Designation of a Health Care Surrogate lets you name someone to make decisions about your medical care - including decisions about life support - if you can no longer speak for yourself. The Designation of Health Care Surrogate is especially useful because it appoints someone to speak for you any time you are unable to make your own medical decisions, not only at the end of life.

Your surrogacy form allows you to designate both a primary surrogate and an alternate should the primary surrogate be unwilling or unable to perform the duty.

Your Health Care Surrogate designation might state, "In the event that I have been determined to be incapacitated to provide consent for medical treatment and surgical and diagnostic procedures, I wish to designate as my surrogate for health care decisions..." The alternate would act only when the individual named above is unable or unwilling to act, or is unavailable.

Your Health Care Surrogate may speak for you when you are in a hospital or other health care facility. But, like the Living Will, designation of a Health Care Surrogate does not affect initiation of resuscitative care (CPR, artificial ventilation, cardiac compressions, endotracheal intubation, and/or defibrillation) by paramedics who show up at your home. The paramedics are required to initiate cardiopulmonary resuscitation under those circumstances.

Think carefully about whom you choose as your Health Care Surrogate (and/or alternate). Your surrogate needs to be an individual whom you trust and are certain will act in your best interest. You can revoke your designation at any time. Surrogacy: Another way to stay in control.

Do Not Resuscitate Orders

The Do Not Resuscitate Order (DNRO) allows the end-of-life patient to direct all health care professionals (including paramedics) to withhold cardiopulmonary resuscitation (CPR) including artificial ventilation, cardiac compressions, endotracheal intubation, and/or defibrillation if your heart stops or if you stop breathing, whether at home or in a health care facility. The DNRO is actually a medical order written by your physician and signed by you.

Three points are vitally important to understand about the DNRO. First, it is the only advanced directive that the paramedics are allowed to follow when death occurs outside of a health care facility such as a hospital or nursing home. Yes, the DNRO will be followed in those facilities, but when you choose to remain at home for those last few months, weeks, or days, the DNRO is your only option to prevent medical intervention upon death.

Second, a Florida DNRO must be signed by both you and your physician, and the form must include the doctor's medical license number. Your signature alone will not prevent resuscitation.

Third, a Florida DNRO must be printed on yellow paper, whether original or copies. While the paramedics (or hospital personnel) can comply with your request to withhold resuscitation, the order that directs that action must be printed on yellow paper. Photocopies (in yellow) are acceptable. The DNRO must be presented to responding paramedics immediately upon their arrival in order to prevent resuscitative efforts.

Because a DNRO requires a physician signature, you should talk to your doctor before you are sick and considered unable to make your own decisions. You can revoke your DNRO at any time. You control your fate with a DNRO.

You may print out your own copy of the Florida DNRO by going to the website below:

<http://www.doh.state.fl.us/DEMO/Trauma/DNRO/Form1896.pdf>

SMOKE ALARMS SAVE LIVES



THINGS TO REMEMBER:

1. Test your smoke alarm regularly.
2. Your smoke alarms have a battery as well as electrical wiring. The recommendation is to change batteries when the time changes (each spring and fall), but at least once a year. **It is recommended that ALL smoke/CO alarm batteries be changed at the same time!**
3. Gently vacuum alarm every six months. Dust can clog a smoke alarm, so carefully vacuum the unit using the soft bristle brush.
4. Smoke alarms do not last forever. BRK/First Alert has recommendations depending on the model number of your installed unit. www.BRKelectronics.com
If you feel you are unable to change your own smoke/CO alarm batteries, please contact The Villages Public Safety Department at 352-205-8280 when you have all new batteries in hand and will be at home for a couple of hours.

Note: We cannot make a specific appointment time.

Some special considerations for the deaf or hard of hearing...

As every deaf individual well knows, the traditional, audible alert smoke detector does not work for the deaf or severely hard of hearing individual. In fact, if you are one of the thousands of older individuals who uses a hearing aid, has a cochlear implant, or other assistive hearing device, the traditional, audible detector may not serve your needs if there are times when you remove that assistive device.

For you, a smoke alarm made specifically for the deaf or hard of hearing is imperative to keep you safe in an emergency. An internet search engine can lead you to several different types of devices that can benefit the deaf/HOH community. Some have an audible alarm and strobe light. Some have only a strobe. You can purchase a device that connects to your smoke detector and physically "shakes" your bed. Unfortunately, none of these are free; you'll have to spend some money to protect yourself and your home. It may also mean having a contractor install the devices, but it certainly is better than having an inadequate warning system.

For those of you who wear a hearing aid, cochlear device, or other assistive device, you may think that having a visual warning device is unnecessary. After all, you wear a device that allows you to hear. But unless you wear that device 100% of the time or have a hearing partner by your side 100% of the time, that visual warning may mean the difference between being safe or sorry.

The website below will provide you with a variety of strobe light options. This website is offered as a suggestion. The choice is yours!

<http://www.brkelectronics.com/search/search.php?query=strobe&search=1>

Resource Guide for Individuals with Impairments or Disabilities

Whether you have an impairment, disability or are just aging, needs change and there are products available to provide assistance.

We have compiled some product resource/suggestions to assist you with your independent living.

By no means is the enclosed information an exhaustive list of products or vendors.

This information was compiled from basic internet searches, so use the information as a guide not a definitive source to find products that will assist you further.

The Villages Public Safety Department does not endorse specific products or manufacturers. The items listed here serve only as representation of types of products available to consumers.

Smoke Detector—Bedside Alarms

There are models that actively listen for the sound of your smoke alarm (and ignore all other sounds at the same frequency, about 3100 Hz).

When it hears your smoke alarm it immediately initiates different signals to wake you up.

Some have a visual signal as well with a display flashing the word FIRE.



It may also have a physical vibration from the bed shaker. When the alarm is triggered, the bed shaker, usually placed between the top mattress and mattress pad, vibrates strongly. The bed shaker may be included or purchased separately.

There are other models that immediately flash and set off a loud, low frequency audible sound. This will set off a motorized bed shaker.



Both types of alarms range in cost from approximately \$149.00 to \$324.00.

Smoke Detectors w/Strobes

This type of strobe light detector has a separate flash pattern to distinguish between a smoke/heat or CO danger and can be interconnected with existing smoke, heat and carbon monoxide alarms.

There are some smoke detector kits that may have a vibrator and strobe attached.



Easy to install and use
Completely portable
Wireless signal for closed door operation
Instant notification transmits signals up to 100 ft.



Both detectors range in cost from approximately **\$60.00 to \$320.00.**

Weather Radio Strobes

Check with the manufacturer of your weather radio (or an after market company) to purchase a strobe for assistance to a hearing impaired individual. Remember that the strobe light also has batteries, so these batteries are recommended to be changed at the same time the weather radio's battery gets replaced.

These range from \$15.00—\$30.00 depending on the manufacturer of the weather radio you have.



Bed Shakers, Lamp Flasher, Telephone Ringer

There are lamp flasher and bed shaker combos

- This item can be wireless and connect to a phone and lamp.
- Some come with a bed shaker as an option, some come with the item.
- Additionally they might offer an alarm clock alert.



You can also just purchase a bed shaker that connects easily to the amplified telephone to signal incoming phone calls and alarm clock alerts. The powerful shaking action wakes even the deepest sleeper.



Some models are a cell phone ringer/flasher.



Some features include an audible and visual alert that are activated when there is an incoming phone call on your landline telephone or your cellular phone.

- Additional options may have a cell phone strap which vibrates and/or the ringer will alert you with a unique ring tone.
- Plug in an optional bed shaker for nighttime alerts.

These four types of alarms range in cost from approximately **\$39.95 to \$59.95.**

Additional information about these and other products can be found on the following websites:

AMAZON.COM

BRKELECTRONICS.COM

LIFETONESAFETY.COM

MIDLAND.COM

MODERNSENIORPRODUCTS.COM

SAFEAWAKE.COM

SMITHGEAR.COM

SOUNDCLARITY.COM

OR

Check your local...

Lowe's, Home Depot or Ace Hardware Stores

So you think you want an AED Program in your community



Read to learn:

What it is

Why we need it

How it will work

Who will be responsible

How much it will cost

What is the proposed program?

We would subscribe to an alerting service and purchase one (or more) AED units (Automatic External Defibrillator) which would be placed in waterproof cabinets on the outside of a strategically located home in our community to provide rapid response to anyone who experiences a sudden cardiac or respiratory arrest.

Why do we need an AED program?

Even though we may not be far away from a fire station, we cannot be sure that medics will be in a station when the need arises, and the emergency team may have to come from a greater distance.

Statistics show that nationwide there is a 6-7% chance of surviving a cardiac arrest that occurs outside a hospital. The Villages has a much higher survival rate (over 40%) largely due to the number of AED units located throughout the community at recreation centers, the 122 existing Villages AED communities, and the response time of medics.

The AED combined with immediate CPR has saved the lives of numerous people in the Villages. For every one minute delay in starting CPR and using an AED, the chance of survival decreases by 10%. Thus if the medics arrive in seven minutes there is only a 30% chance of survival if a person has not had CPR administered.

CPR BUYS TIME. THE AED BUYS LIFE!

What does the AED unit do?

When sudden cardiac arrest occurs, the heart starts to flutter (fibrillate) but not enough to pump blood. CPR (chest compression) makes the heart pump and keeps oxygen flowing to the body, but will not "start" the heart. The AED is a battery operated device that diagnoses whether a heart needs to be defibrillated (shocked) into resuming a normal rhythm. It gives audible commands and is so simple anyone who understands English can be taught its use in a few minutes.

How would the program work?

There are XX homes in the proposed AED community area of _____. We would like to have at least 10-15 persons trained as "responders." The Villages Public Safety will provide CPR training free of charge. The more "responders" trained the better our community will be able to handle an emergency situation. In this way, one or more responders would be at home at any time. Each responder household would be listed with the alerting service. When a cardiac arrest occurs, the first thing is to call 911. The 911 operator, in addition to determining the nature of the emergency and dispatching the medics will see on their screen that the attack occurred in an "AED Community" and would also send out the alert to all responders. While one or more responders would go immediately to the home, others would pass by the homes where the AED units are located and take them where needed. The units are stored in locked cabinets attached to poles or on house walls where they are readily available to responders, all of whom will have keys.

Who would be responsible?

The Villages Public Safety Department oversees and assists the program. They will order the equipment under their state contract, train the volunteers and provide continuing updates on training and equipment.

The responder volunteers would be responsible to administer CPR and pick up the AED unit on the way to the emergency. The alerting program is on a monthly service fee. The batteries in the AED's are guaranteed to last 4 years before they need to be replaced.

There should be a checking account established, an "AED Fund," in which all contributed funds are deposited and from which all checks will be written. The account can be set up where two signatures are required to write a check.

What are the costs?

Through the Villages Public Safety Dept. the AED, water-proof case, and outside cabinet have a total cost of \$1753.00. The alerting service costs \$4 per month per household. Prices are subject to change. Assuming your group would need one AED-case-cabinet and 10 households with the alerting service, the initial cost would be: **\$2275.**

A small amount of money would also be needed in order to install a marine-quality lock on the cabinets to insure the safety of our AED. After the initial training, purchase, and installation you may want to collect a smaller fee (\$20-30) annually to continue and plan for battery replacement at \$245 each. (Remember: Batteries are guaranteed for four years.) Part of this annual contribution would also help to pay for the alerting service for the responders.

By use of 50/50's and other fund raising ideas, you could pay for any batteries or incidentals that come up for the life of the program.

SOME QUESTIONS

What if some people don't participate?

Because of liability concerns, **EVERY HOME** in a "designated" community would be covered in the case of an emergency regardless of whether they contributed or not.

Why should I join then?

The program needs your participation.

Do I have to be a volunteer?

No. Just if you want to.

Is the AED difficult to use?

It is virtually foolproof, and so easy to use anyone who understands English can use it.

Do I have any legal liability?

Florida's Good Samaritan laws protect any lay person who goes to the aid of a person in distress. Since the AED "shocks" only people who are clinically dead (i.e. not breathing) there is no risk of hurting someone.

What about mouth-to-mouth?

Mouth-to-mouth is no longer recommended.

How long is the CPR/AED training?

2 to 2 ½ hours. Capt. Gail Lazenby of the Villages Public Safety Dept. would schedule a training class (or classes) at no charge for those individuals who are part of the community AED program wishing to be responders.

Would we respond to all emergencies?

No, just cardiac/respiratory arrests.

What about people on other neighborhood streets?

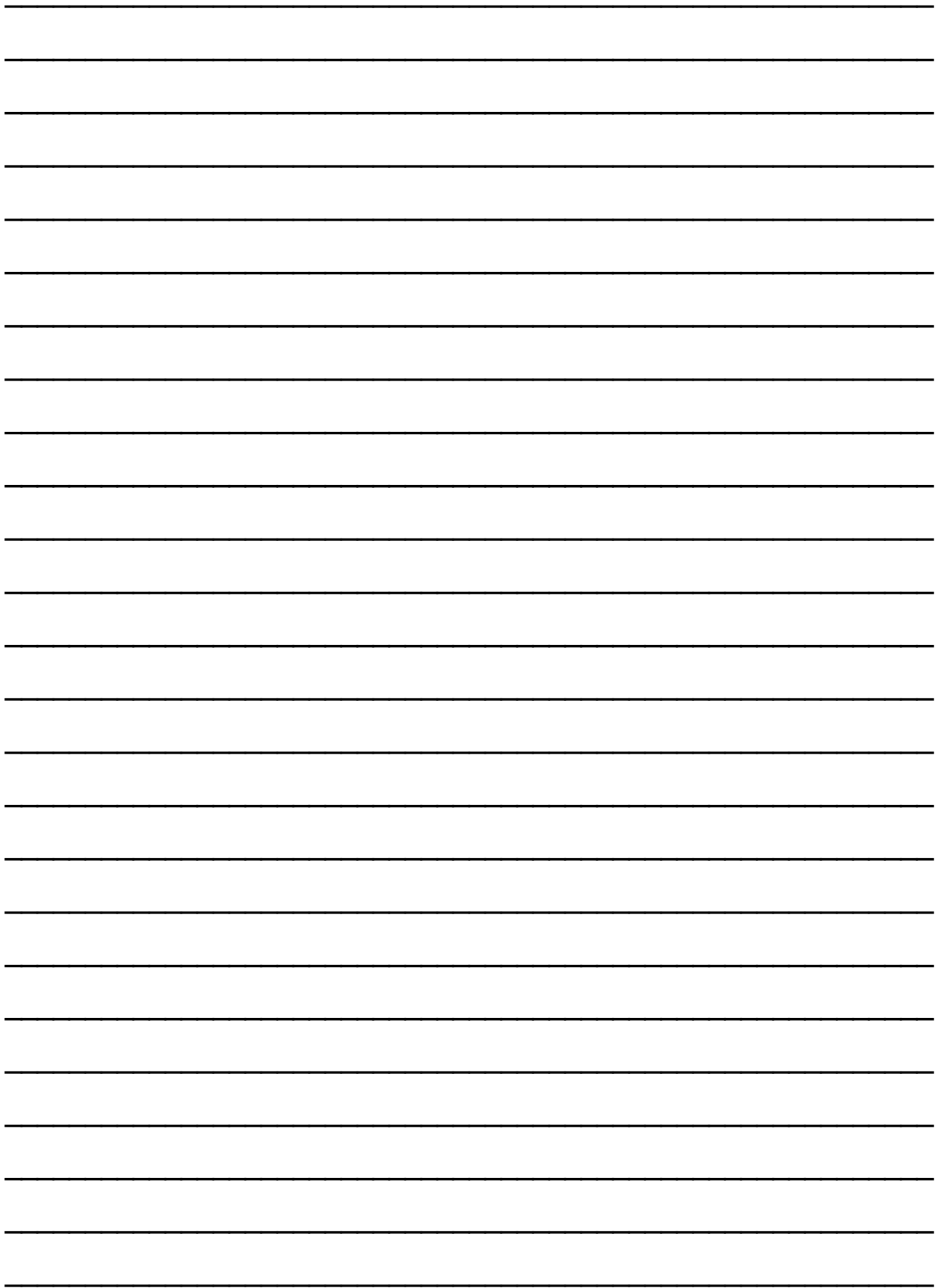
The Public Safety Department feels that neighboring streets should be a separate AED program.

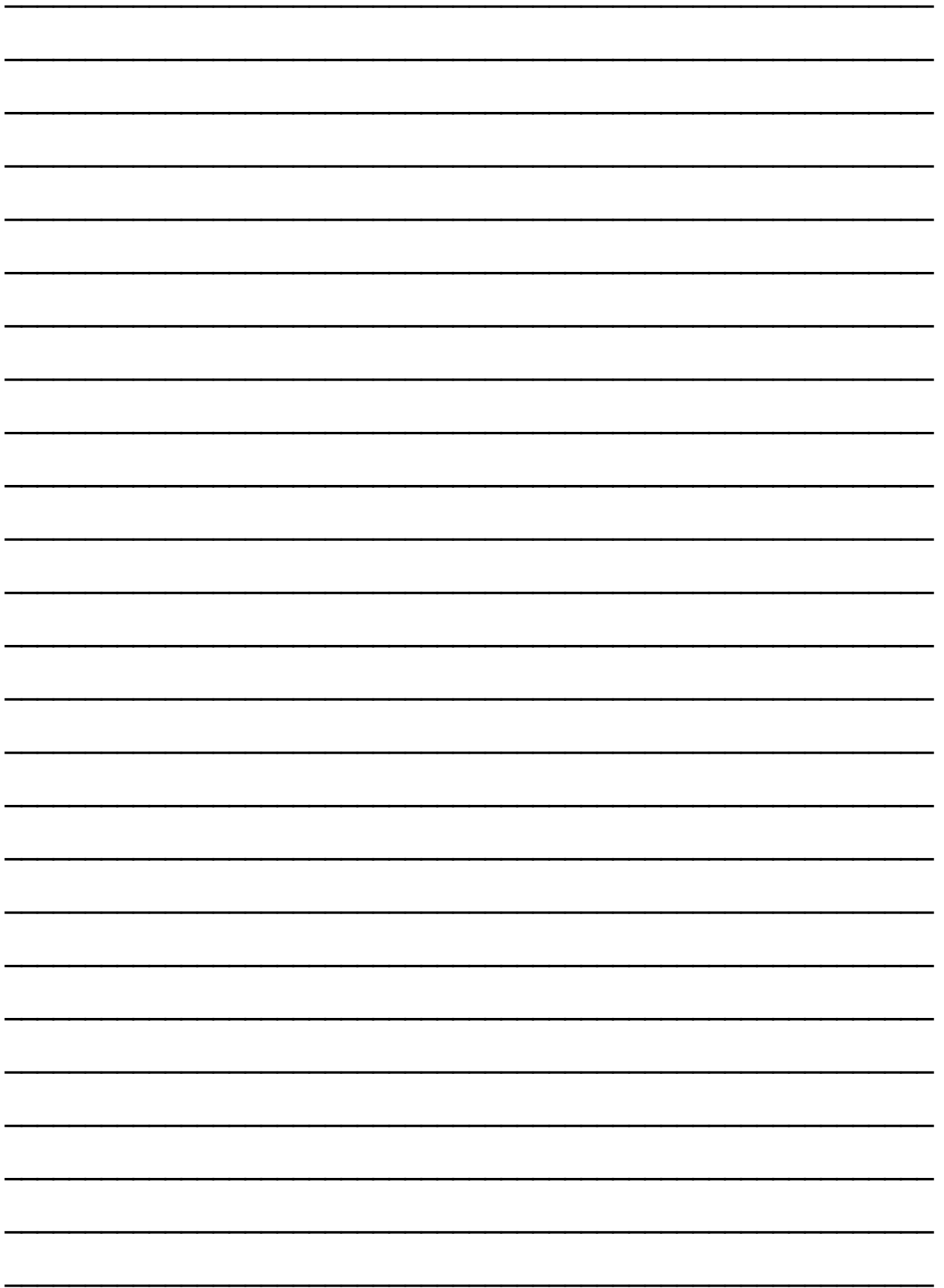
How does the alerting system work?

The alerting system fee is \$4 per month per household. As a result, the system can be set up to send a message to your home phone, your cell phone, your text message, and your spouse's cell phone and text message. The "alert" is generally sent out within 15 seconds of the fire department being alerted.



This image shows a single page of white paper with horizontal black lines. The lines are evenly spaced and run across the width of the page, typical of notebook or legal stationery. There are no margins, text, or other markings on the page.





Villages Fire Station Locations

Station #40
2455 Parr Drive

Station #41
8013 CR 466

Station #42
17202 Belle Meade Circle

Station #43
1419 Paradise Drive

Station #44 / Fire Headquarters
3035 Morse Blvd

Station #45
3555 Buena Vista Blvd.

Station #51
1231 Bonita Blvd

Telephone: (352) 205-8280

Fax: (352) 205-8290

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<http://www.districtgov.org/PDFView/PDFView.aspx?path=/departments/Public-Safety/VPSCCombined.pdf&gl=publicsafety>