

On the Line

Our Core Values: Pride, Respect, Duty, Unity, Integrity and Compassion.

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Upcoming Events

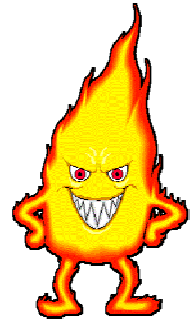
Fire Marshal Rech has several site visits scheduled—be sure to check the schedule for your opportunity to do a walk-through on buildings within our response area.

Be sure to check the pub-ed calendars for upcoming events!

Types of Fire Calls

The 46 fire calls we had in February fall into the following categories:

Fire / Explosion:	16
Hazardous Condition:	2
Service Calls:	6
Good Intent Calls:	8
False Calls:	13
Excessive Heat:	1



UFD statistics for February

Calls for service: 181 YTD: 369

Average response Time – All incidents:

7 minutes and 5 seconds

Average response Time – **Emergency** incidents: **6 minutes and 43 seconds**



Emergency Medical Service calls: 135

Average Response Time **EMS: 6 minutes and 36 seconds**

Emergency: 6 minutes and 27 seconds

Non-Emergency: 6 minutes and 45 seconds

Fire related calls: 46

Average Response Time **Fire: 8 minutes and 13 seconds**

Average turnout per fire incident: 7 people

We **received mutual aid eleven times** – four times for fire calls and seven times for EMS calls.

We **gave mutual aid five times** – four times for fire calls and once for an EMS call.

Birthdays:



Rod Silvers	March 19
Paula Merfeld	March 26
Demir Miljkovic	March 26
Jessie Christensen	April 1
Jamie Erie	April 9
Joe Malloy	April 10
Lesley Olsasky	April 16





Chief's Corner—Chief Jerry Holt

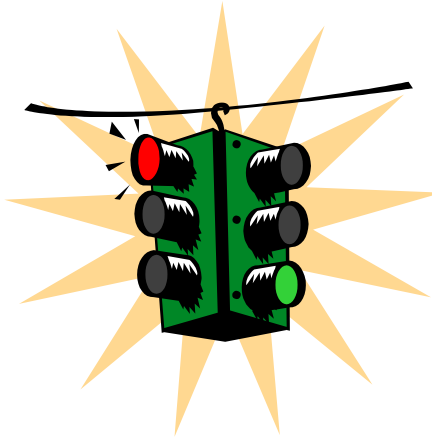


Safety – It's more than lip service!

Our efforts to afford you a safe place to work continue. Our culture is good – we don't have people driving without seatbelts, we don't have operations occurring without personnel accountability and we do not tolerate freelancing. We conduct all of our operations with the incident priorities (LIP) as the basis of operation and those operations are deeply rooted in risk benefit analysis; we will risk a lot to save a life, we risk a little in a highly calculated manner to save property and we will NOT risk our lives when lives are already lost or when property is already lost. We stop at all stop signs and red lights...we don't "just slow down so that we could stop if we needed to" – we stop! Why? Because when operators "just slow down enough to stop" they usually don't slow enough to stop if they really needed to – they just tell themselves that they could stop if they needed to. Why are these concepts so important? Because things go wrong and we need to assure that we do everything that we can to reduce the chances of an incident that involves death or injury of our staff and the customers we serve. Let's look at one example:

There is always someone who will do the unexpected. I've taught my daughter since the day she began driving that she must always look at intersections – even when she has the green light. You can't be too careful... I am convinced that most people have no expectation that a fire apparatus or an ambulance would be coming through a red light after all, if one has the green light; one expects everyone else to stop. When they have the green light, they have no expectations that someone is going to run the red light. I've told my daughters that a million times – you can't be too careful! That lesson would be driven home (no pun intended) the day after Christmas last year.

Picture the scene – it is the day after Christmas. People are off work and out and about returning gifts, running errands on their day off and still celebrating the Christmas season. A truck approaching the intersection at Douglas and 100th notices that there is one car in the left lane as the driver approaches the intersection in the right lane. The light turns green long before the truck gets to the intersection yet the car in the left lane doesn't proceed through the intersection. The driver of the truck is immediately drawn to the stopped car and studies the situation as he approaches the intersection. He can't help but wonder what is wrong as



the driver sits there as the light is green. As the truck passes the car, the source of the problem becomes readily apparent. The car is "staying put" because there is an ambulance approaching from the right with lights and sirens activated. The truck sees the ambulance as it is in the middle of the intersection and realizes that this was a close call. Both of the occupants in the truck realize that the car had stopped for the right reasons and that they should have been focusing on the surroundings and not on the car alone.

Fortunately, the driver of the ambulance, an Urbandale crew consisting of Brennan Burke and Rodney Silvers did just what they were supposed to do. They approached the intersection and they didn't slow down with the red light – they stopped. Little did they know that their actions would result in the avoidance of an accident with some knucklehead who was going to proceed through a green light without first looking. Perhaps you've been there? Maybe sometimes you feel like we do some of the "safety stuff" we do just "because" but this was the ultimate – they performed just like they were supposed to and because of it, they avoided an accident. I've seen it many times in Urbandale – our crews do an excellent job of driving and stopping when and how they are supposed to.

I am grateful that we have crews that don't just give lip service to safety that happens in some departments. As the Chief, I try hard to set the example and safety is my utmost concern with our customers; internal and external. But that day, the day after Christmas 2008, I was most proud of the actions of Brennan and Rodney because it wasn't just any customer's life that was impacted by their sound actions; it was my daughter's life – it was my life. I was the driver of the truck that wasn't paying attention...and try as I may have tried, I didn't practice what I had preached many times to my most valuable cargo. My actions reinforced a valuable lesson for my daughter that day – that you MUST be alert – even when you have the green light and that the Urbandale Fire Department does practice what they preach...we stop. Safety doesn't just get lip service in our department. Thank you Brennan and Rodney – thanks for doing the job the way it is supposed to be done.

Thanks to all of you for keeping our customers safe – sometimes in spite of their actions. Sometimes people make mistakes – thanks for getting it right and for looking after us!

Customer Service at UFD– Lt. Dan Birkett

I know what you are thinking? Blah, Blah we've all heard about this before, right? Well I would hope so, being it is the most frequently performed job that we do in the fire service today. Whether you like it or not the second you accepted a job at the UFD you started performing customer service.

There are entire classes, programs, and books based on customer service. What I thought I could do for this article is talk about some of the customer service points related to EMS.

So, what does our average pt. expect? It is actually quite simple.

- 1.) Someone to help them in their time of need.
- 2.) Someone to respond in a timely manner.
- 3.) Someone that is professional, courteous, and nice.
- 4.) Someone who can provide a solution to their problem.

Anyone who has been around the fire service for any time period knows the wide range of opinions that our pt.'s share on what constitutes a time of need. Everyone can name a few calls that you wanted to just say "Are you kidding me?" Obviously, that is trying to put it nicely. To make this very simple we must remember that for whatever reason we were dispatched was an emergency to our pt. This person is requesting help, whether we think it is BS or not, we should be helping them in their time of need. In so many cases in EMS I have seen us get upset and complain longer than it would have taken us to help the pt. in their time of need. Yes, it is difficult when we are tired and have been working all day and then all night. Yes, it is difficult when we consistently have 10-15 call days or in Mike's case 3 call days. Remember we are here to do a job, we are getting paid, and the customer has no idea what your schedule is or how many calls you ran last year!

Once someone decides they have a time of need they expect our help in a timely manner. Most people do not call 911 and schedule an appointment with the UFD, they call us when they feel that we are needed. Some of the ways we can affect this timely response are very simple. We can choose the attitude that this is what we are here for and "I am going to take pride in my job". We can start heading to the bay as soon as we are paged



even without knowing what the call is for. We can choose to show up on all general tones when we are available, not just what we think will be fun or sounds good. We should have a good understanding of our MDB, LG mobile, and what to do if these systems fail. If we are driving the ambulance we should be doing this safely and appropriately. When we arrive on scene someone from the UFD should be making contact with our pt. as soon as possible. Finally, be an

advocate and come up with ways that we can increase our response times and make sure they get passed on to the staffing and response committee. In cases where we have multiple calls, bad weather, or any other circumstance it is our job to come up with an immediate course of action. The customer does not care what meeting we are in, training we are doing, or anything else that we seem to feel is more important than responding to their time of need. This is an area where everyone at UFD at every level can make a difference.

Once our customer discovers their time of need and we respond in a timely manner we are not off the hook. Our customers expect us to know our job, understand the use of our equipment and at least make them believe you may have been on an EMS call once before in your life. Ultimately, you must have the mental and physical ability to carry out a solution to their problem. The pt. expects us to be understanding, caring, respectful, and nice. This expectation extends to their family, friends, pets, property, and each other while in their presence. Some simple ways to meet this expectation are to introduce yourself and crew, never talk down to the pt., act like you give a crap about what the pt. or family is telling you, explain your course of action and what options the pt. has, be extremely aware of pt. privacy, and use care not to damage personal belongings or property. At the top of the list is just being nice! Don't think I am not realistic. I understand that at times we will have pt.'s that we cannot meet their expectations. The reasons may be completely out of our control or our approach may not be working. This is a small percentage of people and it requires us to be creative and develop a new course of action in an attempt to live up to those expectations.

Continued on the next page....see *Customer Service*

ON THE LINE

Customer Service...Lt. Birkett continued from page 3

If you have made it this far you are doing great! At this point the pt. and their family probably trust you and heck, they may even like you Mike! This is where we decide on the best solution to our pt.'s time of need. We all know that not everyone needs transported to the hospital or at times even needs any medical care at all. So, how are we going to keep them liking Mike? We have to make our customers feel that they have a final solution to their problem. Maybe we can assess them and release them, maybe we can treat and release them, maybe they choose to go to their personal physician, maybe we can consider other resources such as UPD or mobile crisis, maybe we contact family or friends, and the list could go on and on. This may require us to open our minds and be creative or put on our sales pitch for them to accept one of our solutions. There is only one outcome to leaving a customer feeling unsatisfied because we did not provide a solution to their problem. They probably will not like Mike anymore!

I will leave you with a few quotes:

Here is a simple but powerful rule - always give people more than what they expect to get.—NELSON BOSWELL

People expect good service but few are willing to give it.—ROBERT GATELY

Customers don't expect you to be perfect. They do expect you to fix things when they go wrong.—DONALD PORTER

WHAT'S HAPPENING AROUND THE DEPARTMENT...

- A new initiative is being developed. Watching the "embedded" journalist in the war in Iraq, an idea occurred to me why not do something like that with the fire service? As such, we have found a videographer who has an interest in shooting footage of some of our incidents. We would gain by having video documentation of our operations and the journalist would benefit by having the opportunity to get some different shots than the "standard" angles. The videographer will not be allowed in IDLH atmosphere and will be trained in HIPPA and other sensitive issues as to not create issues for our department. Spencer Vaughn, a videographer for KCCI has agreed to undertake some training that will allow him better access to our scenes. The process of developing that training is currently underway and we hope that we will see Spencer at some of our scenes in the near future. Some of the training Spence will be taking is ICS training, FD operations and safety training.
- The Safety Committee continues to work on ways to reduce injuries and incidents. Look for some goals to be published soon along with some "rewards" for meeting our target!
- The replacement ladder is on order and we will be opening bids on a new set of hydraulic tools for station 41 next week. We hope to have the tools on board in less than a month and the ladder is still "up in the air" thanks to American LaFrance. Stay tuned...

"YOU'VE BEEN CAUGHT DOING AN OUTSTANDING JOB" LETTERS...

We continue to recognize your efforts. Whenever we receive a thank you letter, card or a phone call, we pass that along to the people involved in the form of a "You've Been Caught Doing An Outstanding Job" letter. As of March 10th we have sent 21 letters to our personnel. The following people received "You've Been Caught" letters since our last newsletter:

* **Lt Birkett** was acknowledged by a member of his crew who observed him going above and beyond in the customer service arena on an EMS call. Lt. Birkett responded to a call where an elderly lady was sick in bed for a few days and really did not eat much or do much of anything. Her daughter stopped by with groceries right after we received the call. Lt. Birkett went outside and got all the groceries from the daughter's car. He not only brought them into the house but he got rid of the out dated and moldy fruits and vegetables out of her fridge, with the permission of the daughter. He then restocked the fridge with all the fresh groceries. Lt. Birkett did all of this while the medics were doing the patient assessment and getting her ready for transport. It was one of those things that really set a great example of what exceptional customer service should really be. The patient and her daughter were really pleased with what Lt. Birkett did. This is exception customer service!

* **Lt. Birkett** and **Cory Macumber** were acknowledged for their efforts in helping people with their gear. Demir wrote: The other day I got my gear all muddy on a call and started the washing process right after my shift. The next day I stopped by the station to put my gear back together (Lt. Birkett pulled it out of the washer and put it on the drying rack) and as I walked in I noticed my gear was already hanging in my gear locker, put back together. I was really surprised and it saved me a ton of time. I later found out Cory had put my gear all back together and hung it back in my locker. It might not seem like a big deal but It was really one thing that put a huge smile on my face and meant a lot that someone would go out of their way to help you out and save you some time. I also noticed today on shift that he was washing all the gear from a fire the other night. He was drying it and then putting it all back together. He also asked me if I wanted mine washed while I was in class and I just thought that was really great for someone to go out of their way and do something for all the people that were at the fire considering how much more professional you look with clean gear and don't have to worry about getting yourself and everything around you dirty. Once again, both of these guys showed exceptional customer service—to our internal customers...each other!

Thanks to all of you for providing outstanding service!!

Are You Heart Healthy? Cody Thorne

As part of the Fire Service we work daily with patients who are having cardiac emergencies. So naturally we have learned to recognize the signs and symptoms of impending cardiac doom. We all know the preventative measures for cardiac compromise taught to us in our medical training. We ourselves undergo annual physicals to evaluate our own cardiac condition, but are we doing everything possible to ensure our own heart health?

Often we see the headlines on Firehouse stating another brother or sister has lost their life in the line of duty, but have you ever taken the time to click on the link and find the cause of their death. If so, you will find some shocking information, especially if you dig into it. Approximately 50% of all LODD are related to a cardiac cause. In 2008, 45, or 39.5%, of 114 deaths were cardiac related. So far in 2009 16 firefighters have died as of February 28th, 6 of those deaths being cardiac related. As healthcare providers we need to be taking measures to ensuring our own heart health. Leading a heart healthy lifestyle has been proven to reduce on the job injury, death, and reduce the cost of expenses in care of an injured employee.

Being healthcare professionals we need to identify and work toward reducing our own risk of cardiac injury or death. Some of these risks include your personal risk factors, such as age, family history (Coronary Artery Disease), gender, diabetes, hypertension, smoking, high cholesterol, obesity, and a lack of exercise. If you can pick out one or even several of these little red flags it's time to start taking action! Other risk factors that come with what we do, include; repeated exposure to carbon monoxide and hydrogen cyanide, which we all know are both present at fire scenes. Particulates of combustion both long term and short term exposure have been proven to acutely trigger heart attacks, especially if you have the right history. Physical exertion and heat stress resulting in fluid loss are also both very common factors in firefighter related deaths. All of those risk factors can be both easily avoided and yet overlooked.

So, as everyone has learned and had drilled into their heads for years, the risk reducing measures to cardiac related injury and death, this should be a lovely review! First step: Adopt and maintain a healthy diet. There is always some Fad Diet sweeping the nation from coast to coast giving ideas of how to increase fat loss and live healthier. You really don't need those trendy ideas. What you can do is start looking at the nutrition panels on the foods you buy at the store. Look for foods without saturated or trans fats as they are bad for you and will increase your risk for Atherosclerosis, coronary artery plaque buildup and weight gain. Instead, look for foods containing polyunsaturated or monounsaturated fats. Despite popular belief your body DOES need fat for energy. The main key in healthy eating

is watching your fats and consuming only the calories that you burn. Establish a diet that works for you in keeping regular meals, being in portion and frequency, and limiting snacks in between meals. Also, try to limit the foods rich in sodium. Mainly, a balanced diet is the key. Stick to that old food pyramid!

Second step: Maintaining a regular exercise plan. This is a piece of cake, no pun intended. A regular work out can be as simple as doing at least 30 minutes of moderate activity every day. Example: A brisk walk with a friend while maintaining a conversation. As your physical activity begins to increase and your body adjusts accordingly, you can increase your exercise plan to accommodate those changes.

Some of the best exercise plans are meant to improve your aerobic capacity, strength, endurance, flexibility, and reduce body fat. You just need to find a plan that works for you and stick to it! Another great idea is to find your target heart rate (THR) and heart rate training zones, which can easily be found online. Achieving your THR puts just the right amount of stress on your heart to increase the areas listed above safely.

Third step: We must practice proper use of our SCBA's while on the fire scene! Plain and simple! This will significantly reduce the amount of carcinogens and particulate matter you inhale while conducting operations ultimately reducing your risk for heart disease.

Just remember there are plenty of resources out there to get you started, try out menshealth.com, womenshealth.com, or americanheart.com. They are all great sites chuck full of goodies just for you. Matters of the heart are no laughing matter. We must always be conscious of our hearts condition and performance. Increasing the performance of your heart and body will increase your performance on the fire ground or EMS scene resulting in a happier you!



Last Safety Incident:
35 days without a safety incident
203 days without a lost time injury

Other programs/training/projects completed by UFD in February:

Training Report: 470 hours of training were completed in February. (This is a partial listing)

Fire Training: 287 hours

EMS Training: 183 hours

Prevention & Inspection Activities:

Other programs/projects:

- Completed 19 Inspections
 - Completed 5 re-inspections
 - Completed 2 preplans
 - Conducted 4 plan reviews
 - Conducted 5 Car Seat checks
 - Conducted CPR classes for 14 people
- Conducted public education for 230 people – 156 children, 74 adults



Date	Location	Activity Type	# of Kids	# of Adults	
2/2/2009	St.42	CPR class	0	9	
2/4/2009	St.42	CPR class	0	5	
2/11/2009	St.42	Station tour	2	1	
2/16/2009	7110 Prairie	Safety Talk	40	5	
2/19/2009	St.41	Station tour	14	4	
2/28/2009	12955 Aurora	Kids Event	100	50	
			156	74	Totals
					230



Free CPR classes

Once again in April we will be working with American Heart Assoc. to offer free CPR classes. This is the Family and Friends class – which is a class for the general public. This is not a certified course, but instead a course where people want to take it just for themselves. Check with anyone you know who might be interested in learning CPR. What better way to spend a couple hours of their time than learning how to save a life. And who knows – hopefully not, but it could be yours. Class dates will be posted when they are scheduled. If anyone has any questions, they can see Lt. Stuckle.



Member Profile...

Member Profile: Joel Westendorf

Length of time with UFD: 6 months

Level: PT FF/EMT-B

Why I became interested in the UFD: Getting ready for retirement from my full-time job and I was looking for something to do in my spare time

Previous EMS experience: Baxter Rescue Squad from 1992-1994; Altoona FD from 1998-2008

Previous Fire experience: Baxter FD from 1991-1994; Altoona FD from 1998-2008

Family life: Married to Rynda for almost 23 years. Children are Jessica – 22, Melissa – 18, and Aaryn – 9. Pets include my Dalmatian “Siren”; my wife’s Cavashon “Xavion”; Melissa’s Siamese “Sammy”; Aaryn’s cat “Tiger”; and the newest addition a ferret named “Charlie”

Current Profession: After graduating from high school, I enlisted in the Air Force as a Security Policeman so my family and I could see the world...didn't work out so well because we saw Missouri for 4 1/2 years and have been in Iowa until the present. I am now due to retire in first part of 2010 after 23 years.

Activities or hobbies I enjoy: Hockey, Arena Football, Guns and Motorcycles (although not necessarily in that order)

Most memorable moment: I have had many memorable moments but most recently it was the swearing in of the new members of the Urbandale Fire Department. Having a ceremony for new members beginning their tenure with the UFD along side of members and officers of the UFD and Urbandale council made for a memorable evening. I found that the ceremony showed the new members and their families their time and effort are appreciated.

Favorite TV programs: Big Bang Theory, CSI, Big Brother, Rescue Me

Favorite movies: Ladder 49, Backdraft, Wild Hogs and Saw I-V

Last book that I read: Does Guns & Ammo or Firehouse/Fire Engineering magazines count?

Personal goals: Retirement from the Air National Guard and attending Paramedic class (even though that means becoming a Hawkeye for a few months)

What I enjoy about the Urbandale Fire Dept: The camaraderie and the friendships that I have made in the short time of working there



Safety Tip - Beware of refreezing

March is supposed to be our wettest month of the year; and we have a history of getting lots of snow. However, we could also have some warm weather during the spring. If we have warm weather with melting, and then it gets cold, things are going to refreeze and it will be a slick mess. May not look like it, but be careful of driving, and most of all, of walking so that you don't fall. We don't want anyone getting injured.



Protocol: Nausea/Vomiting

(Adults Only)

When transporting patients with certain medical problems, nausea and vomiting may be present. In many cases, the nausea and vomiting may cause patients more distress than the actual illness itself. Providing relief to these patients will be beneficial. Possible medical conditions associated with nausea and vomiting are as follows but not limited to:

Flu.

Pancreatic and gall bladder disease.

Inner ear disorders.

GI bleeding.

Motion sickness.

Remember that nausea and vomiting may be due to a serious underlying trauma or medical condition. It is important to obtain a thorough medical history on all patients to ensure that a more serious condition does not exist. Do not hesitate to consult with medical control.

Basic Treatment Guidelines

Follow Initial Care Protocol.

If other conditions exist, refer to appropriate protocol.

Be alert for airway compromise caused by vomiting.

Administer oxygen as patient condition warrants.

Transport in position of comfort.

Keep the patient NPO.

Advanced Treatment Guidelines

Establish IV access and infuse as patient condition warrants.

Consider monitoring ECG and performing 12-lead ECG if patient condition warrants.

Consider ZOFTRAN (ondansetron) 4mg slow IV push over a minute. **In adults only.**

Contraindications

Pregnancy

Known hypersensitivity