

November
2020

Fire Line Newsletter



In This Issue:

From the Balcony –
*A Message from
Chief O’Leary*

Higher Education
Why it Matters
– *AC Gerritson*

Operations by
the Number

EMS Autonomy
– *AC Janquart*

News from the
Station

Dry & Wet Hoseline
Stretches
– *AC Knowles*

New Construction

Thanksgiving Safety
– *DC Schumacher*

Peer Fitness Tips
– *FF/P Jack Prall*

From the Balcony: Nothing is Routine

What was seemingly a routine non-emergent transport to the hospital for station three’s crews turned into anything but for them in the early morning hours of September 15, 2020 as one of our ambulances was involved in a serious motor vehicle crash at the intersection of Johnson and Main. Thankfully our medics and their patient were only shaken up, and after viewing the video from the ambulance’s on-board camera system and the overhead camera of the intersection it’s remarkable none of our personnel were seriously injured or killed.

Our ambulance crew acted instinctively once they checked on their patient, (and each other) then began treating the injured parties in the car. One patient was ejected from the vehicle and died. The driver had to be extricated from the driver compartment and was airlifted from the scene with life threatening injuries. The driver of the car would have died if not for the superior treatment he received by our personnel.

By all accounts this was a major vehicle crash response, one that we would

normally see out on the interstate and not expect at a controlled intersection at 4:15 a.m. What made this response more complex was the fact that our ambulance was involved in the crash and we had two of our own involved plus the patient they were transporting to the hospital. The quick-level headed thinking of our ambulance crew as they shifted from crash victims to rescuers, was nothing short of remarkable. The incident response was accurate and timely in large part because of the immediate scene size-up provided by FF/PM P. Wilson to dispatch and incoming crews.

The resilience of FDLFR personnel continues to amaze me how you work with expert precision in extremely trying conditions. Our partnership with the other entities on scene continue to provide a smooth and professional mitigation of serious emergency responses. In many ways you make the complex seem somewhat routine.

*Until Next Month,
Be Safe and
Be Well
Fire Chief
Peter O’Leary*



FOND DU LAC FIRE RESCUE OPERATIONS

By: Assistant Chief
Erick Gerritson



Higher education: A 'big picture' perspective on why it matters for firefighters

The following is an excellent article on reasons why you should start toward earning your degree now, don't wait...

A lot has been written concerning the fire service's trend toward higher education. To be clear, I am a proponent of educational requirements in the fire service. I am one of those people who believe a well-rounded college education helps personnel, and officers especially, succeed in the fire service and life in general.

That said, does a college degree take the place of field-level experience. The answer is, "absolutely NOT." But when combined with the appropriate amount and type of field experience, a college education can help build the fire service professional.

I'm sure you've read articles and heard the arguments that completing an accredited degree program improves writing proficiency, communication skills and research capability. That's all true, and it doesn't take long to realize their impact as one moves through a fire service career.

But let's consider this from another angle – a "big picture" standpoint.

THE BIGGER PICTURE ABOUT EDUCATION

After a career in the fire service and more than a decade in

in higher education, I've heard the arguments against education requirements. But most of them are short-sighted. Sure, when someone calls 911, they aren't going to ask if the responding personnel have a high school diploma or a Ph.D. And we've all worked with or around "book smart people" who have every set of initials in the signature line of their email but couldn't make a split-second decision on an emergency scene. But if you just make arguments against education requirements, you are missing out on several great opportunities.

Promotions: The fact is, higher education requirements are a growing part of the prerequisites list for promotional exams, and a huge part of getting ahead of the competition in departments where a degree isn't required. Dismissing the significance of degree requirements only hurts you when it comes to promotional opportunities.

Cost-savings: Besides the promotional opportunities associated with an accredited degree, you need to consider other things. Many departments provide education incentives, reimbursement programs, or both. If someone else is going to pay for you to go to school or give you more money in

in your paycheck once you've graduated, why wouldn't you do it? Plus, there are tuition discount programs available for fire service personnel at some colleges and universities.

Access: Don't forget that fire service leaders interact with all sorts of different people each day. Many of them – including career politicians, city or county managers, department heads and attorneys – may play a role in approving funding or making administrative decisions. Others – business executives, community group leaders and the public – can influence budget decisions. A solid formal education can help put you in a position to interact and collaborate with these people confidently.

Side jobs/expanded careers: You may even have opportunities outside of your fire department. Depending on how far you go in your educational journey, you may be able to turn your degree into a steady side income.

CHOOSING A DEGREE PROGRAM

Accreditation: First, you want to make sure the college or university is accredited. Accreditation from one of the six regional accrediting organizations is the gold standard. Credits and degrees from institutions



Higher education: A 'big picture' perspective on why it matters for firefighters continued...

that are regionally accredited generally transfer to other schools without a problem. The ability to transfer may be especially important if you find you need to change schools for any reason or decide to pursue an even higher degree down the road. If you're wondering whether the school you are considering is regionally accredited, the easiest thing to do is to determine which organization accredits the state universities in the state where the school is located.

Cost: After you've narrowed down your choices based on accreditation, it's time to consider cost. You'll want to explore any discounts available to you through things like union membership or military veteran status. While it's easy to compare tuition rates, you want to make sure that you compare "apples to apples" between schools. Some institutions include fees and textbooks in their basic tuition, while others charge for those items separately.

Transferring credits: Transfer and prior learning credits also fall into the cost considerations. If you have any credits you've previously earned, you want to know if they will transfer to your degree program. Many colleges and universities that cater to adult learners have programs that award you credit for college-level learning that you've acquired outside of a formal classroom.

The International Fire Service Accreditation Congress (IFSAC) and Pro-Board certifications may transfer as course credit or allow you to test out of certain courses, depending on the college or university. All of these can significantly decrease the cost of your degree and may even help you graduate a lot sooner than you thought.



College degrees and higher education are a part of the fire service and will become indispensable to career advancement as time goes on. (Photo/Getty Images)

Style – traditional vs. online: A final consideration is the style of the degree program. You need to decide if a traditional classroom approach fits your needs or if an online program suits you best. Both have their advantages and disadvantages.

In the traditional classroom setting, you have "face time" with the instructor and your classmates.

That can be very helpful for some students to stay engaged, especially when learning tough concepts. But a disadvantage is the schedule for classes. Many fire service personnel can't attend class every Monday, Wednesday and Friday, for example.

Online learning, on the other hand, is generally more flexible. That can be great for someone who is a shift worker. But that flexibility comes with the caveat that students often don't feel connected to each other or their instructors. Remaining engaged in the remote/online learning environment can be difficult for some students.

NOW IS THE TIME

College degrees and higher education are a part of the fire service and will become indispensable to career advancement as time goes on. Going to school for higher and advanced degrees will undoubtedly have a positive impact on your personal and professional life for years down the road. If you're considering earning your degree, now is the time. It's a decision you won't regret.

Source: Jon Dorman of Fire Rescue 1

**Until Next Month...
Be Safe!**



Operations by the Numbers

August, 2020	By Month		Year-To-Date	
	Last Year	This Year	Last Year	This Year
PREVENTION				
Total Inspections	275	278	2377	1762
Total Defects	134	86	1462	872
SUPPRESSION				
Alarms Involving Fire	12	6	87	91
Fire Mutual Aid Given	2	0	9	11
Fire Mutual Aid Received	1	0	1	3
Service/Good Intent Calls	50	44	396	438
False Alarms/False Calls	39	30	298	239
Other Calls	14	15	137	137
Total Fire Alarms & Calls	115	95	918	905
EMS				
Total Ambulance Calls	520	570	4697	4650
Total Fire/EMS Responses	635	665	5615	5555
Fire Property Loss	\$92,780.00	\$11,000.00	\$406,318.00	\$587,300.00
Fire Contents Loss	\$55,500.00	\$3,005.00	\$193,696.00	\$268,956.00
Engine Assisted EMS Calls	235	256	2053	2021

Birthdays, Employment Milestones, Upcoming Events

UPCOMING EVENTS

Election Day

November 3rd

Veterans Day

November 11th

Thanksgiving Day

November 26th

~ **Happy November Birthday** ~

*Deb Pinnow · Kevin Doll ·
Andrew Golla · Nick Fahrenkrug*

Congratulations John Hicken!

25 years at FDLFR

Start Date: November 13, 1995

 like us on
facebook

 follow us on
twitter



The Code Summary

By: Assistant Chief Todd Janquart

A Discussion on Patient Autonomy in EMS

In their seminal work on the subject, Beauchamp and Childress proposed modern bioethics should be based on the principles of autonomy, beneficence, non-maleficence and justice. Of these, the principle of upholding a patient's autonomy creates the potential of many difficult ethical dilemmas. These dilemmas are especially demanding for EMS practitioners in the dynamic and often dangerous field, where crews are expected to make decisions quickly and frequently without command of all the pertinent facts.

Despite the importance of the principle of autonomy, there is little discussion within EMS circles of this topic. With this in mind, this essay aims to explain the principle of autonomy and how it pertains to the modern EMS practice, specifically, this essay will explain what informed consent and capacity to consent means within EMS practice.

This essay will lay out a rudimentary explanation of patient autonomy as it relates to EMS. It is hoped that by exposing the reader to these considerations, the reader may be able to reflect on his/her practice almost as a form of vaccination against unethical practices. The unique ethical demands of treating pediatric patients and balancing the demands

of acting in the child's best interest against parental autonomy is beyond the scope of this essay.

What is Autonomy?

Derived from the Greek *autos* ('self') and *nomos* ('rule'), autonomy describes the philosophical tradition of self-rule or governance. In order to truly act in an autonomous fashion, a person must have liberty and agency; the absence of coercion and the capacity for intentional action, respectively. In healthcare terms, autonomy refers to the obligation of the healthcare provider empower patients to direct their own clinical as much as possible. This includes consenting to assessment and treatment as well as directing the nature of their care.

Informed Consent

Informed consent imposes on the practitioner a duty to both inform the patient before obtaining consent and before initiating a treatment or assessment. Thus, informed consent relies heavily on the practitioner to be honest and be able to effectively communicate accurate information with the patient. In particular, practitioners are obligated to disclose to the patient his/her clinical condition, available treatment options, desired outcomes, and potential side effects. For example,

a practitioner may decide to treat pain with an analgesic such as morphine or fentanyl are likely to help manage pain. The practitioner must also explain they may experience side effects including nausea, drowsiness and obtaining consent from the patient before administering it. The patient at this point may be more averse to nausea, for example, than pain.

EMS practitioners may benefit from the example set by our colleagues in law enforcement. Following the landmark *Miranda vs Arizona* decision, officers must advise persons in their custody of their Constitutional rights to legal representation and Fifth Amendment protections before questioning.⁴ While it is not suggested that practitioners use pro-forma approach to patient care in the same way police officers recite a well-practiced legal warning, it should be understood that an unknown right or treatment option is no right at all.

In cases where patients are unconscious or semi-conscious, there is a long a standing principle of implied consent whereby the practitioner is compelled to act in the patient's best interest. Outside of situations involving health care proxies, guardians, and advanced directives

(which will be discussed below), these scenarios are fairly straight forward. The duty to act for these patients is more thoroughly examined within the principle of beneficence as opposed to autonomy.

Respecting patient autonomy requires a high degree of disclosure from the practitioner. In most American states, professionals are bound to the reasonable person standard for disclosure. While the standard has not concrete requirements, which can be useful in EMS due to the variety of situations. However, it can be difficult to implement because of its metaphysical and subjective nature.

Consider, for example, a heart attack victim refusing treatment or transport despite being very obviously seriously sick and peri-arrest. Or a patient in labor who refuses to allow a male provider to examine her placing not only her own life at risk but also that of her unborn child. What is an acceptable risk? Who is this reasonable person? How well can a patient be reasonably expected to grasp and understand the complexities of the human body in the midst of a medical emergency? How does the reasonable person balance risks and benefits?

Unfortunately, there is no



A Discussion on Patient Autonomy in EMS Continued...

clear answer. Despite centuries of reflection, just how exactly to judge what is or is not reasonable remains an open debate amongst legal scholars.⁵ Suffice to say, a modern healthcare provider must not conflate their idea of the ideal treatment pathway with the only acceptable treatment option for the patient.

In relation to EMS, autonomous patients have tremendous breadth to dictate their own treatment. They can elect to not undergo assessment, treatment or transportation. An autonomous patient can even dictate to which facility they be transported to, subject to clinical appropriateness and operational constraints; not every patient needs to go to the closest facility.

Capacity to Consent

In a manner similar to the dichotomy rights and responsibilities within the modern Western democratic societies, the right to self-determination in healthcare is contingent on the patient's ability to make informed decisions. While much work has been done on requiring practitioners to disclose all pertinent information to patients and their representatives, there is now new emphasis on the ability of the patient's ability to understand that information in order to give consent.

Of course, EMS practitioners routinely come into contact with patients of diminished capacity and competence. Although these terms are often used interchangeably, there does exist an important differentiation. Competence is generally accepted as a term of law to describe long-

term ability or inability to make informed decisions whereas capacity is a term of medicine that describes the ability or inability in an acute setting. Thus, an otherwise competent patient may temporarily lack the capacity to make informed decisions as in the case of an intoxicated patient or in the case of traumatic brain injury.

Patients deemed incompetent will typically have a nominated surrogate to make healthcare decisions. These surrogates will typically have an instrument of guardianship awarded by the court. Guardianship should not be confused with a healthcare proxy. As noted above, a guardian will have written authorization from the court to make any and all decisions on behalf of the patient regardless of his or her wishes. By contrast, a healthcare proxy is nominated by an autonomous (competent) patient to make healthcare decisions on his or her behalf in the event the patient should lose capacity at any point.

Therefore, the wishes of the healthcare proxy can be viewed as an extension of the wishes of the patient. Practitioners should familiarize themselves with guardianship and healthcare proxy laws, regulations, and documentation within their area of operations in order to be able to identify these guardians and proxies when they present themselves on scene.

Similarly, advanced directives and "do not resuscitate" orders (also referred to by different names and abbreviations throughout the country; DNR, DNAR, DNACPR, MOLST, etc.) are

likewise made in advance, typically with input from the patient and their provider. These, too, should be considered extensions of patient autonomy and, like guardianship and healthcare proxy instruments, dutiful practitioners must familiarize themselves with the unique forms and functions of such orders they are likely to encounter within their area of operations.

It is imperative that practitioners understand that these orders and proxies are expressly for instances where a patient lacks capacity. A capacitive patient may refuse transport to the emergency department from his/her home over the objections of his/her proxy.

Although proposing a specific model or tool for assessing patient capacity is beyond the scope of this work, the reader should be mindful of the ethical implications of assessing capacity in their practice. Any assessment of capacity must demonstrate a patient's ability (or inability) to understand their condition and treatment options and use that information to make an informed decision. It is also worth mentioning that assessing capacity is a dynamic process taken from multiple observations over time. A patient experiencing hypoglycemia, for example, may initially lack the capacity to refuse treatment but may regain that capacity after being treated with glucose or glucagon. That a patient may then refuse further treatment or transport to the emergency department; just because a patient initially lacked the ability to make an informed treatment decision, does not mean that a patient's capacity cannot be restored at some point during the patient's treatment.

Conclusion

Healthcare providers are expected to act in an ethical manner and to respect patient autonomy as much as is possible. Although the prehospital field is a fluid and challenging environment, this obligation is no less important to EMS practitioners.

Autonomy refers to the patient's right to self-rule and within healthcare, is predicated on full and honest disclosure on the part of practitioner and the capacity to understand that information in order to make an informed decision on the part of the patient. Practitioners should strive to be truthful and effective communicators with their patients. It is vital for the modern practitioner to note that a patient simply cannot make an informed decision otherwise. Practitioners must also be effective at identifying the capacity or incapacity of a patient to make informed decisions and to act accordingly.

Of course, no ethical principle exists in a vacuum. The principle of respect for autonomy is intimately with the other three principles of biomedical ethics: beneficence, non-maleficence and justice. Ethical dilemmas occur when one or more of these principles come into conflict. In order for the practitioner to resolve an ethical dilemma requires a solid grounding in all four principles. Given the lack of literature on the subject as it relates to EMS, further writing is required.

With that being said, this work should help the reader better understand how and why competent practitioners uphold respect for autonomy despite all these challenges.

News from the Station

Fox 11 News Good Day Wisconsin was recently at Station 1 shooting live segments to talk about fire safety in the kitchen. Thank you for helping us promote fire safety during Fire Prevention Week.



The Kindergarten Class at Fond du Lac Christian School recently donated six cases of water to the crews at Station 2. Thank you for your generosity and support!



Well-trained people are the best defense against fire.

By: Assistant Chief of
Training/Safety
James Knowles III

Dry & Wet Hoseline Stretches

Its 0200 HRS and you're responding as part of an initial-response complement to a fire in a four-story, wood-frame, multi-family dwelling. Upon arrival, you observe fire coming out of a front window on the third floor of the dwelling, with people exiting the common center stairwell; more people are standing at their windows on the fourth floor. Smoke is visible in the glass stairwell above the third floor, indicating that the main means of egress for residents above the fire has been cut off and people are trapped in smoky apartments.

As the engine company arriving on the scene of this emergency, your action or inaction in the first couple of minutes could mean the difference between life and death for those trapped above or adjacent to this fire. Although you may be tempted to throw ladders or go into rescue mode, the most important life-saving technique that you must employ immediately is a properly deployed, pumped and advanced fire line to control the fire. Once the fire is controlled, everything else gets better.

In past articles, we've discussed hose loads, positioning of hoselines, chocking doors and working together to get fire lines in

service. In this article, we'll focus solely on how far to stretch a dry hoseline before you charge it with water to begin your advance on the fire.

The Need for Speed

The number one reason to take your hose uncharged as far as you can: to improve speed of deployment. The key is to get the line as close to the fire as safely as possible before you put water in it so you can get to the fire faster.

Think about it: Stretching an uncharged hoseline up two flights of steps is much easier than advancing a charged line up those same flights of stairs. And stretching a dry line from an enclosed stairwell to an apartment door is easier than advancing a charged hoseline that was stretched and charged from a stairwell, even if the hallway is free of products of combustion.

As you evaluate your buildings and train on hose deployment, remember the old adages: "Work smarter, not harder" and "Take time to save time." By stretching and flaking hose prior to charging, you save energy and time. An uncharged hose is simply easier to move and lay out. Also keep in mind that if

you have buildings in your response area that allow you to stretch closer to the fire (those with interior stairwells, long hallways, etc.), you should have hoseloads that facilitate deployment in these situations. For example, a triple layer or stacked load doesn't work well for advancement of a dry line to the third floor; however, a flat load, minuteman load or a reverse-horseshoe type load all work well.

When Not to Charge & What to Watch For

When not to charge always depends on fire location and extent. You shouldn't be charging a dry hoseline if you can't see the line (due to smoke); it should be charged prior to that point. Why? 1) It's easier to see the objects that your hose may get caught up on when you're not in a smoke-filled environment, and 2) it ensures you don't get caught in a rapid fire progression event without a charged hoseline.

As you operate on the engine company deploying hoselines, you must know the warning signs of flashover or rapid fire progression: pressurized, dark smoke; high heat; roll-over; a lowering thermal layer; and superheated

air and/or pyrolysis. These conditions were a key factor in the death of Cincinnati firefighter Oscar Armstrong on March 21, 2003. Armstrong had advanced an uncharged hoseline into an extremely hostile fire environment without water in an effort to extinguish the fire more quickly. But without water, you can't control or extinguish any fire. There were other issues associated with his death, but one of the biggest was over-commitment with an uncharged hoseline, they had gone past the point where they should have called for and waited for water.

Where & How?

You should be able to advance, flake and stage hose in any atmosphere that's free of products of combustion (smoke). These areas may be:

- Outside a fire building;
- On the floor below the fire floor;
- On the stairs or stair landing below the fire floor;
- In an enclosed stairwell up to the level of the fire floor where you can be protected by a fire door; or
- Up to the door of an apartment on the fire floor, provided the door is



Dry & Wet Hoseline Stretches, continued...

Retrieved from:
<https://firerescuemagazine.firefighternation.com/2012/12/11/dry-wet-hoseline-stretches/>

closed, controlled and not opened until the hose stretch is ready.

Outside the building

When entering an area where you'll encounter fire from the outside entrance point (front door, basement access, etc.), you must first advance from the apparatus and:

1. Flake the hose in order to assist your advance.
2. If possible, flake perpendicular to the door to eliminate another bend in the hose as you enter and turn left or right.
3. Stage at least 50 feet of hose to cover the fire area.
4. Remember to leave someone to move the hose to the nozzle team.
5. Charge, bleed and test flow. You should know if you have a kink or water issues based on your flow, reach and stream characteristics.

Floor below the fire or stairs/landing below the fire in open or compromised stairwell

When entering a floor where products of combustion are present, or an unoccupied space (apartment) that leads directly from the stairs:

1. Stop one to two floors below.
2. Take the nozzle and first coupling to the landing below the entry door so you have hose flaked below for an advance.

3. Remember to position someone on the stairs to feed the hose as it's advanced.
4. Charge bleed and test flow. You should know if you have a kink or water issues based on your flow, reach and stream characteristics.

Enclosed stairwell

When entering a floor or apartment where you have the protection of an enclosed stairwell with a fire door to seek refuge:

1. Flake halfway up the landing. Don't take the bend around the return stairwell or the hose will get caught. This helps with advancement because it uses gravity to your benefit. Control the door.
2. Remember to position someone on the stairs to feed the hose as it's advanced.
3. Charge, bleed and test flow. You should know if you have a kink or water issues based on your flow, reach and stream characteristics.

To the door of an apartment on the fire floor

Use caution to ensure the door is controlled. This means communicating with all firefighters (truckies) to make sure the door isn't opened or control isn't lost until the hose is ready and charged. If a search needs to be initiated before the hose enters, close the door. If you suspect heavy fire, control the door, then:

1. Flake to hose in the hallway and have 50 feet of hose ready to make the apartment when you begin

your advance, The best way to accomplish this is to stop short of the door and flake the hose as you approach, with the first coupling closes to the door leading to the fire.

2. Charge, bleed and test flow, You should know if you have a kink or water issues based on your flow, reach and stream characteristics.

A word of caution: It's strongly recommended that search operations be delayed until the line is in position and charged. If the situation calls for a search in front of the line, the line should be charged, staffed and in position for the crew's protection.

Other Keys to Success

- Ensure all doors that your hose passes through are controlled (chocked – always give consideration to the air track and ventilation affects when chocking doors) to ensure you get water when you need it. An unchanged hose easily fits under a door, and that door will cut off water once the hose is charged.
- Always make sure you have a good stream and flow before committing to the fire area.
- Don't take too much hose to the point of charging, and advance to eliminate kinks and poor water flow.
- Use hallways and rooms on floors below the fire to stage extra hose to ease in advancement into large areas. The closer you can

get extra hose during your advance, the easier it will be for your support firefighters to feed the hose to your nozzle team, thus allowing for more rapid fire extinguishment.

- Be cautious when dealing with wind-driven fires, or when advancing into a long hallway or apartment on an upper floor that's exposed to wind.
- Take a little time to save crucial time.

Back to the Beginning

Returning to the scenario at the beginning of this article, what should you do? With people trapped on the fourth floor of the building, you must first rapidly deploy your hose to load to the landing on the second floor. Then flake the last 50 feet as far as you can up the stairs so you have the nozzle and a loop of hose below you for the apartment. Next, flake excess hose on the second floor and force a door if needed, to stage extra hose on that floor. All of this should take 30 seconds or so. Lastly, call for water (charge, bleed and test flow) and initiate attack on the fire apartment.

Remember: Proper deployment and operation of the hoseline will save more lives than any other tactic on the fireground. The faster we can get the hoseline into position, the better – and safer – everything else becomes. But efficiency in this task requires constant hands-on training – so get out there and practice!

Current Status of New Construction

- Moraine Park Technical College at 235 N. National Ave. – Building is under construction.
- Fairfield Inn at 925 S. Rolling Meadows Drive – Building is under construction.
- River Hills Mixed Use Development on S. Main St. – Buildings 1, 2, 3, 4, 5, 6 & 8 are complete and 7 & 9 are under construction.
- Demolition continues at Forest Mall.
- Badger Liquor – Warehouse is under construction.



Kids can learn to dial 911 in an emergency. Define to them what an emergency is, and how to talk to the operator if they do need to ever make a call.



Safety for Kids – Child Safety Protection Month

Did you know that November is Child Safety and Protection Month? It was created to raise awareness about the potential dangers that children face each and every day. Below are some tips to promote safety and protection in our own homes.

- **Be mindful of plants.** Choose decorative plants that are nontoxic. Common household plants can often cause serious sickness.
- **Keep things tidy.** Storage bins offer a great way to store toys and baby supplies, preventing anyone from tripping.
- **Update your exterior.** Place a welcome mat outside your home or apartment. Pesticides and other toxins may be carried inside on the soles of people's shoes.
- **Lock it up.** Put locks on anything and everything that can open.
- **Check out your furniture.** Use angle braces or anchors to secure large furniture to the wall. Place TVs and stereo systems on lower furniture, as far back as possible.
- **Hot water:** Set hot water heaters no higher than 120 degrees F. A lower water temperature reduces the chance of scald burns.

Fire Prevention

The Bureau Never Sleeps

By: Division Chief
Garth Schumacher



Have a Safe Thanksgiving!

Thanksgiving is one of those memorable times of year when so many of us get together with friends, family, and those we cherish most. We often use this time to reflect on the things we are thankful for and often times what we feel we are blessed with.

But each year Thanksgiving turns into an unfavorable memory for some. I think we all have some memories in which we were on-duty working a holiday when tragedy struck, I know I can think of a few. We, like so many, are no different than the rest of the nation when it comes to incidents happening on the holidays. We fill our houses with friends and family, children playing with cousins they haven't seen in a while, cooking in the kitchen, and a multitude of other distractions that can take our eye off of safety.

In light of Thanksgiving rapidly approaching, I wanted to share some tips for safety and some facts related to the holiday with the hope that it can provide some awareness so that your day is fondly remembered. With COVID being in the forefront of everything these days and the fact that we will be dealing with it for some time, I would like to wish each one

of you a safe and Happy Thanksgiving. Please be safe and note the following safety tips and Thanksgiving acts to be aware of.

For most, the kitchen is the heart of the home, especially during the holidays. From testing family recipes to decorating cakes and cookies, everyone enjoys being part of the preparations. So keeping fire safety top of mind in the kitchen during this joyous but hectic time is important, especially when there's a lot of activity and people at home. As you start preparing your holiday schedule and organizing that large family feast, remember, by following a few simple safety tips you can enjoy time with your loved ones and keep yourself and your family safer from fire.

Top 10 - Safety Tips

- Stay in the kitchen when you are cooking on the stove top so you can keep an eye on the food.
- Stay in the home when cooking your turkey and check on it frequently.
- Keep children away from the stove. The stove will be hot and kids should stay three feet away.
- Make sure kids stay away

from the stove. The stove will be hot and kids should stay three feet away.

- Make sure kids stay away from hot food and liquids. The steam or splash from vegetables, gravy or coffee could cause serious burns.
- Keep knives out of the reach of children.
- Be sure electric cords from an electric knife, coffee maker, plate warmer or mixer are not dangling off the counter within easy reach of a child.
- Keep matches and utility lighters out of the reach of children – up high in a locked cabinet.
- Never leave children alone in a room with a lit candle.
- Keep the floor clear so you don't trip over kids, toys, pocketbooks or bags.
- Make sure your smoke alarms are working. Test them by pushing the test button.

Thanksgiving Fire Facts

- Thanksgiving is the peak day for home cooking fires, followed by Christmas Day, Christmas Eve, and the day before Thanksgiving.
- In 2017, U.S. fire

departments responded to an estimated 1,600 home cooking fires on Thanksgiving, the peak day for such fires.

- Unattended cooking was by far the leading contributing factor in cooking fires and fire deaths.
- Cooking equipment was involved in almost half of all reported home fires and home fire injuries, and it is the second leading cause of home fire deaths.

Have activities that keep kids out of the kitchen during this busy time. Games, puzzles or books can keep them busy. Kids can get involved in Thanksgiving preparations with recipes that can be done outside the kitchen.

Thanksgiving is a wonderful holiday, but the day can be ruined by a cooking or candle fire, or a burn injury. Have an enjoyable day with your family but keep it safe and ensure that your smoke alarms are working.



Candle Safety

Candles may be pretty to look at but they are a cause of home fires — and home fire deaths. Remember, a candle is an open flame, which means that it can easily ignite anything that can burn.

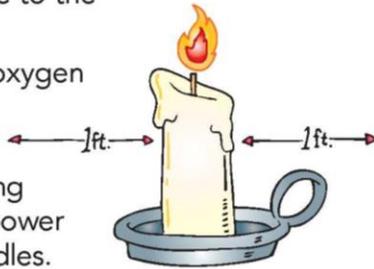
"CANDLE WITH CARE"

- Blow out all candles when you leave the room or go to bed. Avoid the use of candles in the bedroom and other areas where people may fall asleep.
- Keep candles at least 1 foot (30 centimetres) away from anything that can burn.

Think about using flameless candles in your home. They look and smell like real candles.

IF YOU DO BURN CANDLES, make sure that you...

- Use candle holders that are sturdy, and won't tip over easily.
- Put candle holders on a sturdy, uncluttered surface.
- Light candles carefully. Keep your hair and any loose clothing away from the flame.
- Don't burn a candle all the way down — put it out before it gets too close to the holder or container.
- Never use a candle if oxygen is used in the home.
- Have flashlights and battery-powered lighting ready to use during a power outage. Never use candles.



Candles and Kids

Never leave a child alone in a room with a burning candle. Keep matches and lighters up high and out of children's reach, in a locked cabinet.



FACTS

- ! **December** is the peak month for home candle fires.
- ! More than **one-third** of home candle fires started in the bedroom.
- ! **Three of every five** candle fires start when things that can burn are too close to the candle.



NATIONAL FIRE PROTECTION ASSOCIATION
The leading information and knowledge resource on fire, electrical and related hazards





PEER FITNESS TIPS

By: Peer Fitness Trainer
Jack Prall

5 Core Exercises to Improve Balance

Balance is a vital component of health and physical performance and is essential for activities of daily living like climbing stairs or carrying heavy loads. Balance also improves athletic performance, allowing athletes to move and transfer energy more efficiently. Balance is especially important for older adults hoping to reduce the risk of falls and injuries.

Core stability is essential to both static and dynamic balance. Unfortunately, many traditional core-training exercises, such as crunches and leg raises, do little to improve stability. To enhance balance, core exercises should be functional (activities that mirror what you might do in real life), multiplanar and involve both single-and double-leg movements.

Here are five core exercises to use to help boost balance and improve health, fitness and athletic performance.

Core stability is a vital component of balance. These exercises utilize double-and single-leg movement patterns, unstable surfaces and movement across all three planes of motion to challenge the core and

improve static and dynamic balance. Incorporate these core exercises to reduce injury, enhance movement quality and improve athletic performance.

*Author: Kelsey Graham,
Med, CHES
Find her at
kbgwellness.com*



Banded Triplanar Foot

Place a Versa-Loop band directly above the knees and shift into a single-leg, quarter-squat position. While balancing on the stance leg, tap the alternate foot forward, to the side and directly behind you. The core and hip muscles will fire to maintain single-leg balance against the band's resistance in three different directions.

Amp it up: Drop into a deeper squat with the standing leg.

Pare it down: Perform the movement without a band, using only bodyweight.

Hold two dumbbells at chest height and move into a single-leg, quarter-squat position. With control, alternate "punching" the weights across the body, while maintaining stability in the stance leg.

Amp it up: Perform the exercise on a non-slip mat or foam pad to create more instability and increase the core challenge.

Pare it down: Perform the movement without weights, using only bodyweight.



Single-leg Cross-body Punches



PEER FITNESS TIPS

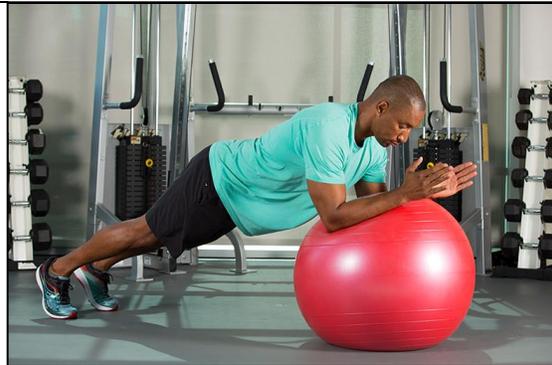
By: Peer Fitness Trainer
Jack Prall

5 Core Exercises to Improve Balance, continued...

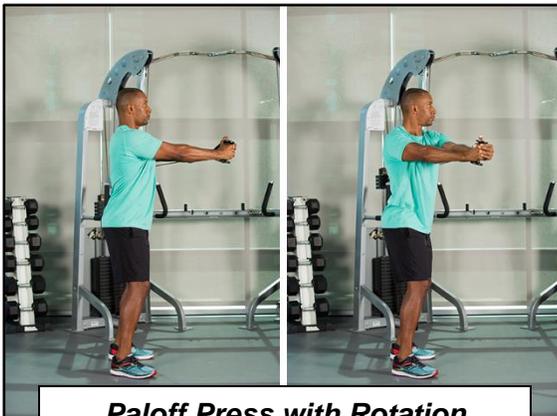
Place your elbows onto a stability ball and walk your feet out until you're in a plank position. Engage the abdominals, glutes and quadriceps to maintain a stable plank pose and keep the shoulders and hips squared to the floor

Amp it up: While maintaining shoulder and hip alignment, "str the pot" with the elbows, by creating small circles with the ball in both directions.

Pare it down: Perform the exercise with the knees on the floor and the hips tucked.



Plank with Elbows on a Stability Ball



Palloff Press with Rotation

Stand perpendicular to a cable machine, holding the cable handle at chest height. Select a low load and walk away from the machine until you feel a slight tension in the cable; extend your arms away from your chest. You'll immediately feel the core activation, slowly turn away from the cable machine, keeping the core, chest and hands in line. Slowly return to the starting position, with the arms extended in front of the chest.

Amp it up: Walk farther away from the machine or increase the resistance.

Pare it down: Turn this into an isometric exercise by holding the starting position for 30-60 seconds.

Stand perpendicular to a cable machine, holding the cable handle at chest height. Select a low-to-moderate load and walk away from the machine until you feel a slight tension in the handle. Move into a single-leg stance with the leg nearest the cable machine. Keeping hips and shoulders perpendicular to the machine and handle close to the chest, lower into a single-leg Romanian deadlift. Engage the core and hip musculature to resist the urge to rotate toward the machine.

Amp it up: Move farther away from the cable machine or increase the resistance.

Pare it down: Perform a laterally loaded double-leg Romanian deadlift, with both feet on the floor.



Laterally Loaded Single-leg RDL