

## Neighbor to Neighbor



# Community Program Helps With AED Units

**Neighbors Saving Neighbors has spread to more than 170 area communities and neighborhoods.**

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When Lew Simon was living in a condominium in Longboat Key, the cost of an automated external defibrillator was in the \$12,000 range.

The former financial consultant was aware of the effectiveness of AEDs in restoring a regular heart rhythm in cases of sudden cardiac arrest. According to the American Red Cross, improved training and access to easy-to-operate defibrillators could save 50,000 lives annually.

Hearing from a friend that the cost of AED units had dropped dramatically — to about \$3,000 — Simon launched an effort to install a unit at his condominium.

“We were the first condo in all of South Florida to have an AED,” he said. “When I moved here, the first thing I did was to convince neighbors to chip in to buy two AEDs.”

That was in 2003, when Simon’s inspiration led to the start of a community-based program called Neighbors Saving Neighbors in the 53-home Sunbury of Glenbrook section of the Village of Glenbrook. The program established the strategic placement of AED units in the neighborhood, as well as arranging for necessary EMS training for participating volunteers.

Since then, Neighbors Saving Neighbors has spread to more than 170 area communities, Simon said, with 15,000 registered households. The District Public Safety Department handles the training of resident volunteers, in addition to overseeing quality assurance issues.

Typically, two or more AED units are placed on the outside of residential homes or in other locations that are publicly accessible in each neighborhood. Although AED units are available at many community gathering spots in The Villages, such as recreation centers and ballfields, the proximity of AEDs within residential communities is a crucially important factor.

“In cardiac arrest, seconds make the difference,” Simon explained. In most incidents involving a 911 call, he says, “The Villages has a very good response time — 4½ minutes to get on site, and 6 to 8 minutes to unload gurneys, get into the house and assess the situation.”

With the Neighbors Saving Neighbors program in place, Simon said, trained volunteers from nearby homes often can respond to life-threatening situations within a minute or two.

Simon described one local incident in which a woman in her 90s had been working in her garden in the heat of July.

“She got heat stroke, and passed out that evening,” Simon said. “Five people were there with an AED within a minute.”

Back when the Neighbors Saving Neighbors program first launched, volunteer respondents were alerted to incidents of cardiac arrest by pager (or, as Simon calls it, “1970s technology”). Now, the program’s volunteers are connected to a web-based emergency notification system called ReadyAlert, which immediately transmits a notification to each registered household in the neighborhood via land lines, cellphones, tablets, email and texting accounts.

“We get called within 20 seconds,” Simon said, “sometimes as little as 6 or 7 seconds.”

Volunteers who arrive on the scene — by foot, by golf cart or any other means — are trained to perform specific duties according to the order of their arrival. The first person on-scene begins hands-on chest compressions, while later arrivals may bring the AED unit, help to assess whether the defibrillator should be used, stand near the street with a flashlight or turn the outside lights on and off to direct emergency personnel to the correct address.

“You just keep showing up,” Simon said.

Although untrained people might be hesitant to use an AED before the arrival of emergency personnel, Simon said anyone can do it.

“It’s simple,” he explained. “The AED gives you prompts. A frail little 80-year-old will be able to do it, if it’s her husband. It’s amazing.”

Despite the increased presence of AEDs throughout Villages neighborhoods, coverage is not yet universal.

According to Lt. John Longacre, of the District Public Safety Department, the community-level distribution of AEDs ranges from “groups that have about 25 houses on a street to over 200 homes in a neighborhood. AED groups do not cover all of The Villages.”

Lt. Longacre is the staff contact for any neighborhood groups that are interested in implementing an AED program. He is a strong proponent of increasing the availability of defibrillators.

“Both my predecessor (retired Capt. Gail Lazenby) and I believe in the reliability and use of an AED so much that we purchased AEDs for our churches,” Longacre said.

“All of the recreation centers have at least one AED,” he continued. “The regional recreation centers have two, one inside and one at the sports pool. The charter schools have AEDs ... (and) The Sharon has two.”

He also stated that AEDs are available at several of the businesses at Lake Sumter Landing, and at all Publix stores in The Villages.

Within local neighborhoods, the existing AED programs have shown results, Longacre said.

“We have had eight saves in eight years,” he said.

What are the logistical factors that a neighborhood group should consider, if they are thinking of developing an AED program? Longacre suggests several ways to determine the correct number and proper placement of AEDs within a neighborhood.

“I use the number of houses, the density of houses in a community and the distance between AEDs,” he said. “I take into account how far an AED respondent would need to travel to get the machine or go to the victim.”

In one small neighborhood, the MacClenny Villas in the Village of Fernandina, residents came together to purchase and install three AED units for the community’s 83 homes. Support for the idea seems to have taken hold, in large measure, as the result of a neighborly “social marketing” effort.