



*Catholic Mutual  
Connection*

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## ANOTHER AED SUCCESS STORY

wife after the paramedics arrived to tell her what happened and suggested she come to the gym. While this conversation was difficult, I wonder how different the discussion would have been if a defibrillator hadn't been available.

I see Barry now about once a week. We've talked about that night often enough that it's old news by now. When I saw him the other day, he was on the street corner collecting money for the Knights of Columbus Tootsie Roll Fundraiser. He bounded up and down the sidewalk and between the cars like a 10 year old kid playing in his backyard. He was laughing and joking with the people who were kind enough to offer a dollar or two to help a worthy cause.

At that moment, it struck me...had our church not invested in a defibrillator, that corner would have been vacant. Nobody would've

been there to collect money, and those contributions would never have been made. His daughter wouldn't have anyone to walk her down the aisle, and his grandchildren would only have pictures to look at. Sometimes we don't realize the size of the hole until there's nobody there to fill it. Don't wait... Hopefully, an event such as this will never happen at your facility. However, what if it did? Would you have an AED available to help save the treasured life of a valued friend, parishioner, student, staff member or visitor?

Catholic Mutual Group has been actively promoting the purchase of AED's for schools and larger parish buildings over the last several years. Many states have now enacted regulations that require AED's to be placed in schools and other places of assembly; this trend seems to continue on a national level.

While purchasing any brand of

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AED would be better than not having one at all, CMG recommends the Philips Heartstart which we have found to be the simplest to use and easiest to maintain. We have worked with Philips and Lifeguard MD to assist our members with the process of purchasing and placing AED's in our locations. Philips Heartstart AED's are provided to our members at discounted pricing to help ease the burden to those locations wishing to purchase one of these units. Information regarding this AED is available at [www.lifeguardmdusa.com/cmg](http://www.lifeguardmdusa.com/cmg). If you have any additional questions regarding the purchase of an AED for your facility, please contact our Risk Management Department.



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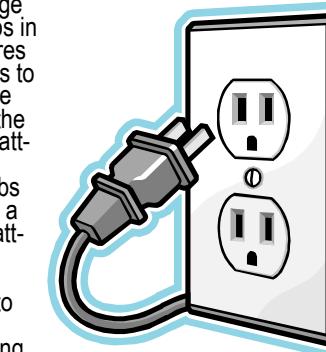
# CONNECTION

## SOME SHOCKING ADVICE

**E**lectrical fires that could have been prevented cost many lives and destroy many buildings every year. The U.S. Consumer Product Safety Commission offers the following tips to get plugged in to electrical safety:

- Make sure cords are in good condition. A frayed or cracked cord could cause a shock or fire.
- Check to see that extension cords are not overloaded, as indicated by the ratings labeled on the cord and the appliance. Change the cord to a higher rated one or unplug some appliances. Remember that extension cords should only be used on a temporary basis and are not intended as permanent wiring.
- To reduce the risks of electric shock, make sure that GFCI protection is provided for outlets at kitchen

counters, in bathrooms, and at outdoor receptacles. Test GFCIs monthly to make sure they are working properly.



- Check to see if outlets and switches are unusually warm or hot to the touch. If so, an unsafe wiring condition could exist.

Equipment breakdown and fires are preventable through the early identification and correction of electrical problems. With the assistance of Hartford Steam Boiler, Catholic Mutual has developed a new survey tool to assist in identifying electrical problems that may prevent electrical based fires at your facilities. The survey consists of nine questions, which, based upon your answers, can help determine whether your facility may be at high risk for an electrical failure or fire. Locations that are rated in the high-risk category should seek the expert advice of a qualified electrical contractor. A copy of the Electrical Assessment Survey can be found under the Risk Management area on our website at [www.catholicmutual.org](http://www.catholicmutual.org). If you do not have your user name and password for our website, please contact the Risk Management Department.

## CLAIMS STORY



During the hot summer months, the Boy Scout Troop from a parish planned for a weekend getaway at a nearby Boy Scout Camp in the cool mountain pines. Shortly after arriving, several of the scouts and three adult leaders went for a hike in the woods. During the hike, it started raining and the group headed back towards the camp. On the way back, the adventurous scouts decided to roll a large log down the hill. As the scouts were working together to lift and then roll the log, one of the boys, Kevin, slipped and fell.

Even though the leaders were nearby, they could not prevent what happened. The log fell, striking Kevin in the head. Kevin's injuries were so severe, a helicopter was needed to transfer him to a hospital. Kevin was left with permanent injuries and his family filed a lawsuit against the Boy Scouts as well as the parish.

Many locations are very supportive of Boy Scout Troops. However, most parishes do not select or train the Scout Master. They also have very little, if any, input into what activities the scouts participate in.

While the Boy Scouts are often part of the parish family, they are a separate organization. In addition, the Boy Scouts have a Na-

tional Charter Program which includes general liability insurance coverage. A Charter Agreement provides this insurance to protect the chartered organization such as a parish or school and includes coverage for attorney's fees and court costs as well as the costs of any legal judgment or settlement. Because the parish completed the very important agreement form, and was a Charter Organization for the troop, they were protected under the Scout's insurance coverage. Had this agreement not been in place, the Diocese's own insurance would have to respond to the tragic injury and lawsuit.

Please make sure for any Boy Scout activities that take place within your organization, a Charter Agreement has been completed and is safely kept on file.

Scouting programs provide a wonderful channel to involve youth in the life of Catholic parishes and Catholic schools.



**A**t the end of 2008, there were 291,443 youth registered in 9,265 traditional Scouting units chartered to Catholic institutions. These figures include many of our Member locations who have Boy Scout Cub Packs and Troops using their facilities. If your parish or school has a Boy Scout Troop or Pack, it is critical that you verify you have been named as a chartered organization for the Troop or Pack to properly insure your diocesan coverage against liability claims resulting from scouting activities. The Boy Scouts of America's (BSA) general liability policy does extend primary liability coverage for all Chartered Organizations with respect to claims arising out of an official Scouting activity. The exception would be that the coverage is excess over any insurance which may be available to a volunteer for those losses arising from the ownership, maintenance, or use of a motor vehicle or watercraft. Once you are certain that your parish or school has been named as a Chartered Organization for your Troop or Pack, it is also important to ensure this charter is renewed on an annual basis. To learn more about becoming a Scouting Chartered Organization, contact your local BSA council or go to [www.Scouting.org](http://www.Scouting.org).

A copy of the Annual Charter Agreement can be found at <http://www.macbsa.org/Post/sections/101/Files/>



Serving the Temporal Needs of the Church Since 1889  
**CATHOLIC MUTUAL GROUP**

An informational newsletter provided to the members of Catholic Mutual Relief Society + Spring/Summer 2010

## ANOTHER AED SUCCESS STORY

SUBMITTED BY: Mark Senak—St. Petronille Parish; Glen Ellyn, IL



Mark Senak & Barry Smith

Defibrillators save lives. It's not a myth. It's not a sales pitch. It's the truth. I know because I was there when it happened. I witnessed how these devices can literally turn death back to life. If you're considering whether to purchase one, don't give it another thought. Don't wait. Find the money. Hopefully, you'll never have to use it. But, if you do, you'll never have to wonder how things might have been different if a defibrillator were available.

It seemed like a good idea: pick-up basketball games every Thursday night to build community and fellowship among the men of our church. Barry had done more than anyone to get the approvals and promote the idea. We all joked about being old and out of shape... how someone should learn to use the defibrillator that was in our school gym. But it was all a joke. We'd never really need it. It was just some device in a small square box hanging on the wall over by the bleachers.

The first week we played without incident. Sure, we were tired, and we all had some aches and pains the next day, but everybody had a good time. We talked about how long it had been since we last played "full court" basketball and how "big" the little basketball court was in our school gym. The fact that nothing happened only proved that all the joking about heart attacks and defibrillators was just that...a joke, something you read about in articles like this. Little did we know that by the end of next week's game, nobody would be laughing...

Barry couldn't make it the first week because he had another commitment. He was probably in better shape than

most guys who played that first night. He was a naval academy graduate and had started swimming again several months before to stay fit. He wasn't overweight and had no prior heart problems.

The games started that second week just as they had the week before, four-on-four, with three guys substituting for anyone who needed a break. We played two games and decided to play one more before calling it a night. During the last game, I was guarding Barry. It was the perfect match-up because Barry and I are about the same age and we agreed to take it easy on each other.

Toward the end of the game, I was standing next to Barry looking at another player dribbling the ball. Suddenly, Barry fell forward onto the court. Other players had fallen, but there was something different about the way Barry fell. He didn't stumble or trip. He didn't put his hands out to break the fall, falling like a tree falls when it's cut at the base. And when he landed on the court, he didn't move. He didn't try to get up, or writhe in pain, he just laid there, face down on the court.

We first thought the fall knocked him out. We bent down to see if he was all right. That's when I first saw the blood. It was coming from a cut on the bridge of his nose. It was clear at that point he was hurt, so we yelled for someone to call 911. We didn't want to move him in case he had a neck or spine injury, so we continued to talk to him in hopes of getting some response while we waited for the paramedics to arrive.

After a few moments, he moved a little, and we all felt a collective sigh of relief. But, any sense of relief was short-lived because Barry wasn't moving in an effort to get up. He was gasping for air, struggling to take a breath. As we stood there helplessly, we soon realized he was fighting for his life. And it became increasingly clear, he was losing the fight.

At that point, he made one last effort to take a breath, and then he stopped.

I looked at his eyes and they were open, but fixed forward, like he was

staring at nothing. I watched as the color of his skin went ashen as quickly as you could turn a page. It was then I realized he was going to die if we didn't do something.

I yelled to some of the other guys, "Get the defibrillator!" We then started CPR. As I went through the steps, other guys coached me on the proper technique. "Hold his nose," one guy said. "Make sure his airway is clear," someone else suggested. After the first attempt, Barry moved, but after each set of compressions we got less and less of a response.

At the moment I thought we'd lost the fight, two guys came with the defibrillator. We opened the box and started following the diagram. None of us had ever been trained on how to use a defibrillator, but the instructions and diagrams were amazingly clear and simple. Someone read the instructions, while the others put the pads on Barry's chest and connected the wires to the pads. Then, the button was pressed and...nothing. Nothing happened.

I recall thinking we had done something wrong, that the battery was drained or the machine was broken.

Just as I was about to utter an appropriate expletive, a synthetic voice instructed, "Step away from the patient." We pulled back and looked at each other, but before anyone could say a word, "Bam!" An electrical charge surged through Barry's body that made him jerk like he'd been hit by a bolt of lightning.

The first thing I noticed was the color of his skin. The ashen shroud that had enveloped his body only moments before was lifting. Then I looked at his chest and noticed it was

starting to expand and contract. About that time, the paramedics arrived and began administering oxygen and monitoring his vital signs. Amazingly, by the time they put Barry in the ambulance, he was talking to us like nothing had happened, asking whether the game was over. I now know what it must have been like to be there when Lazarus walked out of the tomb.

I called Barry's

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## A LICENSE TO GRILL

**A**s the snow finally melts, many of us turn our thoughts to happier days of sunshine, warmth and barbeques. Unfortunately, we take the act of grilling for granted and don't think of the inherent dangers involved with this summertime activity.

In 2006, an estimated 3,448 people were treated in the ER for accidents involving a grill. That was up over 10% from the previous year. The predominant injury was burns, but 17% of the injuries were carbon monoxide (CO) poisoning and 5% were lacerations. Although gas grills are used roughly 1.5 times as often as charcoal grills, they were involved in five times as many fires. Catholic Mutual has also incurred claims due to severe injuries and property losses from grills. With this in mind, we would like to remind our readers to be careful when grilling and offer these tips to help your parishioners, volunteers and families remain safe all summer long.

Liquid petroleum (LP) gas or propane, used in gas grills, is highly flammable. Many of the accidents occur when grillers first use a grill that has been left idle for a period of time or just after refilling and reattaching the grill's gas container. To reduce the risk of fire or explosion, consumers should routinely perform the following safety check:

- Check the tubes that lead into the burner for any blockage from insects, spiders, or food grease. Use a pipe cleaner or wire to clear blockage and push it through to the main part of the burner.
- Check grill hoses for cracking, brittleness, holes, and leaks. Make sure there are no sharp bends in the hose or tubing.
- Move gas hoses as far away as possible from hot surfaces and dripping hot grease. If you can't move the hoses, install a heat shield to protect them.
- Replace scratched or nicked connectors, which can eventually leak gas.
- Check for gas leaks, following the manufacturer's instructions, if you smell gas or when you reconnect the grill to the LP gas container. If you detect a leak, immediately turn off the gas and don't attempt to light the grill until the leak is fixed.
- Always keep lit cigarettes, matches, or open flames away from grills.



- Always store and transport LP cylinders upright and in areas where temperatures won't exceed 120 degrees. Never store a spare LP cylinder on or near a grill or any other appliance.

**Never** use or attempt to construct any type of homemade gas grill. Always assure manufacturer's authenticity.

Charcoal produces carbon monoxide (CO) when it is burned. CO is a colorless, odorless gas that can accumulate to toxic levels in closed environments. Each year, about 30 people die and 100 are injured as a result of CO fumes from charcoal grills and hibachis.

To reduce CO poisonings and other grilling accidents, please refer to the following safety tips:

- Never burn charcoal inside of homes, vehicles, tents, or campers. Charcoal should never be used indoors, even if ventilation is provided. Grill should be kept 10 feet from your home or building.
- Since charcoal produces CO fumes, do not store the grill indoors with freshly used coals

until the charcoal is completely extinguished.

- Only use starter fluid made for charcoal grills, never use a substitute. Never add liquid starter to hot or even warm coals. If your coals are going out, open all the vents and fan the coals with a newspaper.

Some other general safety tips to consider include:

- Always keep a fire extinguisher handy, and make sure it is in good working condition.
- Always wear an insulated fire retardant BBQ mitt and use long handled tools and tongs designed for use with a BBQ.
- Never wear loose clothing because it might catch fire from an unexpected flare up. If your clothes do catch on fire: stop, drop, and roll. This will help smother the flames.

General safety for a BBQ pit follows the same guidelines as those for a charcoal and gas grill. A new BBQ pit should be cured like a new iron skillet. You can rub the inside of your pit with Pam, peanut oil, cooking oils, or even leftover bacon grease. Fire up the pit with a medium fire (225 degrees is recommended). If you have a smokestack control, set it to 1/2 and let it smoke heavily. At least an hour or two is good, the longer the better. Then your BBQ pit will be cured and ready to use.

Very few things beat a warm summer day, barbecuing with friends and/or family. Don't spoil the day with a needed visit to the hospital. Keep safe and happy grilling.



### Now available at a computer near you!

The Risk Management department is excited to announce their **new** interactive safety training programs (*Slips, Trips & Falls* and *Fire Safety*) available at no cost to you through our website [www.catholicmutual.org](http://www.catholicmutual.org). Each training program takes less than 20 minutes to complete. These programs are interactive, requiring the trainee to identify hazards and answer questions throughout the course. The interactive training modules must be downloaded onto your computer. For those locations that may have internet/computer hardware issues and are not able to download the interactive online course, a "view only" version is also available. We invite you to take advantage of this invaluable training resource!

Coming soon....Preventative Maintenance

