HATZOLAH

PULSE

ONE TEAM | ONE PULSE

RESPONDING **IN THE DARK** | ELUL 5783 | SEPTEMBER 2023



2023

MEDICAL RESCUE | CARING FOR LIFE | TRAINING FOR LIFE


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MESSAGE FROM THE CHAIRMAN

"And there was light."

The 2023 Pulse magazine sheds light on the reality of the work and efforts of Hatzolah South Africa over the last year. Our theme of responding in the dark and bringing light in difficult situations is reflected in the content and the style of the black and white pages.

We are deeply blessed at Hatzolah to have the most amazing team of volunteers – men and women who dedicate their time and effort to serving others! Over time, our team has bonded into what genuinely feels like a second family for us all.

For our Hatzolah family, 2023 has been a year of highs and lows.

We had the incredible high of the Hatzolah International Convention, where so many of our friends from around the world came to South Africa to share ideas and learn from one another. The sense of *achdus* was palpable, particularly on the Friday night where we brought in Shabbat with song and dance. A true highlight!

And, of course, the low, of tragically losing one of our brothers to illness suddenly and unexpectedly – Chaim Sholom *zl*. We lost one of our own and mourn deeply for him.

Through it all, the highs and lows, our incredible team of volunteers keeps going, because taking a break is not an option.

As is evident in this magazine, what the team accomplishes daily is nothing short of astounding, especially in a very difficult South African environment. The team navigates the obstacles of load-shedding and degrading infrastructure, as well as a challenging regulatory environment, which is not conducive to excellence.

I salute each and every one of our volunteers, in whatever their role is within Hatzolah, for an exceptional, world-class service despite these challenges!

And none of this would be possible without you, our special community. Without your staunch support, we would not be able to do what we do – and so this venture is indeed a true partnership.

Wishing you all a *shana tova umetuka* – a good and sweet new year where we know no more sorrow!

Warm regards

Lance





WHERE WE ARE IN 2023

MEDICAL RESCUE

- Responders
- Dispatchers
- Hatzolah Assist
- Future @ Hatzolah

CARING FOR LIFE

- Medical gemach
- Hatzolah cares about moms
- Crisis response unit
- Teen Connect line
- Fall prevention screening
- Wellness monitoring

TRAINING FOR LIFE

- Training centre
- Family and friends CPR
- First aid essentials for children
- BLS (basic life support)
- Heartsaver first aid, CPR and AED
- Hugo's Heroes

INITIATIVES

- Life2Life
- Tap to Donate
- Hatzolah Hospitality House
- My QR Code
- Hospital food cabinets
- Aidcall 24/7
- AED Boxes
- Stop The Bleed kits
- Fire hydrant project
- ECG project

COMMUNITY AWARENESS

- Pulse magazine
- Anaphylaxis
- Don't text and drive
- Seizure first aid
- Recognising a heart attack
- Buckle up
- Fire prevention

EVENTS

- Hatzolah Cycle Tour
- Poker evening
- Be a hero, give blood
- Hatzolah Charity Golf Day
- International Hatzolah Convention



THE REALITY OF **HATZOLAH SOUTH AFRICA**

Ronit Janet

Power outages, potholes, darkness and disastrous public facilities are just some of the challenges that Hatzolah faces daily.

In the pulsating heart of South Africa, where we are confronted by the juxtaposition of beauty and challenges every day, a resilient group of individuals stands at the forefront of emergency medical care for the Jewish community and beyond. These are our volunteers of Hatzolah; unsung heroes, who embark daily on a journey that intertwines compassion and courage with the stark realities of a country that is both wild and wonderful. South Africa in 2023 is a road filled with potholes of challenges – whether it be load-shedding, road closures, collapsing infrastructure or service delivery.

When the lights go out, we must still respond. And we do. But the challenges that come with it are manifold. Uriel Rosen, Advanced Life Support paramedic and medical manager of Hatzolah South Africa, explains how the load-shedding affects so many dimensions of a call for Hatzolah.

"Dispatching a call can be seriously affected during load-shedding. Each of the network towers has an inverter to keep the cell towers functional without power. However, when there is a longer period without supply, the batteries on these inverters don't have enough time to recharge. This is when signal can begin dropping." Rosen elaborates how there have been times where large parts of Johannesburg have been without signal. This has the potential for disaster for someone trying to obtain medical attention.

Rosen continues to explain how Hatzolah has a number of ways of dealing with this: "We use multiple networks and at times rely on landline and VOIP or internet-based calling.

Kara Gordon, full-time dispatcher, had one of those calls to remember a number of weeks ago when a lady called the emergency number after Hatzolah had transported her husband to hospital.



Because the signal was so bad, Gordon was unable to hear the caller clearly, but sincerely wanted to help. The caller had asked if we could locate the 'cheese' her husband had left in the ambulance. Unable to find the product, Gordon offered to send someone to go buy some more. The confused caller politely declined. It was only after cleaning up the ambulance and locating the patient's 'teeth' that Gordon realised the misunderstanding.

Mishearing messages can have dire consequences on a call between responders. And during load-shedding, the radios can also be affected. Much like the cell phone towers, the radios at the high site can also be compromised. Hatzolah responders use two-way radios, which bounce off towers at the highest points. Radio signal is affected when the inverter batteries go down during longer load-shedding. Should the radio signal fail, Hatzolah does have a backup system via internet.

Rosen, who is also the dispatch manager, explains how the dispatchers have found dispatching in the dark extremely challenging. Sometimes only having the light from their dispatch tablet as a guide, it is difficult to work in the dark and often the dispatchers go to Hatzolah House to complete their shift as it is fully equipped with lights and all capabilities needed during load-shedding. A hot cup of tea is especially essential.

Saul Jassinowsky, volunteer responder, remembers a night shift that runs through his mind every now and then. "It [load-shedding] happens each time I begin my night shift and, as a result, I find myself checking the stage schedule, hoping for power. It was the night when our ambulance was dispatched to a scene where a lady's life was hanging in the balance. The call echoed in our ears as we sped through the darkened streets. Finding the address in the dark proved to be another challenge. Robots are out and pedestrians go unseen. The adrenaline fuelled by the urgency of the call... 'not conscious, not sure if she's breathing'.

"I rushed into the room and found her, the patient, lying on the floor. 'Full resus in progress' went out on the radio as I began working through our resuscitation algorithm. My hands, guided by memory and training, moved in darkness. Desperation and determination mingled in the air as I pressed down against her chest, each compression in the hope of turning the hands of fate. But the darkness was difficult. The home had no backup power.

"Using head lamps, we scrambled to maintain good compressions, protect her airway, ventilate her, attached electrodes to monitor her heart rhythm, shock her heart, mix drugs and insert an IV line... all in the dark. It is said that when one sense is missing, the others are sharpened but, in this case, the darkness was not just physical. The frustration and anxiety of balancing a life, trying desperately to tip the scale in a situation like this, is disenchanting, to say the least."

Rosen adds to Jassinowsky's experience, explaining how the paramedics need the light when treating patients – whether reading medication or observing how the patient is presenting. "We treat patients, not machines," he says.



"When the lights go out, we must still respond. And we do. But the challenges that come with it are manifold."

The risk of potential injury for the responders is very real in this situation, he adds. Walking up and down stairs or on uneven ground in the dark is never easy. But Rosen's concerns extend further into the community – to the old, sick and vulnerable. "Those who are on oxygen and their backup power doesn't last; those who rely only on landlines and, with no power, can't phone for help."

Yudi Singer, Advanced Life Support paramedic and manager at Hatzolah, adds to the load-shedding discussion, referring to a number of motor vehicle accidents he has attended because of people who jump robots during load-shedding or knock over pedestrians in the dark.

This is not only a result of load-shedding, but because of the roadworks and unsafe road conditions or car safety controls, Singer notes. With road closures becoming a reality as a solution to crime, responders have had to become savvy as to where the various entrances are so as not to delay response times to patients in need. Singer adds that crime has led to Hatzolah South Africa needing to learn how to respond and treat patients that many brother organisations would never dream of. Training for gunshots and stabbings is an unfortunate reality.

Similarly, drownings are a call that Hatzolah has had to become proficient in dealing with. Pools with no locked gates and people in homes who have not been taught to swim can result in very difficult calls – for the families and for the responders attending.

Potholes are unfortunately a reality in current times. Each driver needs to be extra careful when navigating the streets of Johannesburg. How much more so when responding to a call at high speed. The team will often post warnings for each other on the operations WhatsApp group, when a pothole or fallen tree could become a danger. It became what one calls a *bittera gelechta* when one responder announced on the group a very large sinkhole in Glenhazel and, just minutes later, a call came out to the exact location, as a car had driven into the hole.

Another difficult reality that Hatzolah South Africa faces is having to deal with the very busy public healthcare system. Robyn Shapiro, volunteer dispatcher, sadly shared how "people in our community assume that most community members have medical aid, which is not the case". She adds: "My heart sinks when I realise that we have to take a community member to a government facility – not knowing if they will receive timely medical care because they can't afford it."



This is compounded by the reality that Hatzolah must take a patient to the closest government hospital to where the patient is found. The queues of people waiting for treatment can be exceptionally long and, very often, the hospitals have no beds. Responders have been known to run around the hospitals to find a bed for a patient as the emergency rooms are at capacity. Rosen sadly remarks that Hatzolah often has to leave linen for the patient as the hospital does not have any available.

Albert Einstein once said that creativity is just intelligence having fun. And in these times, that's just what we need. Dark times and dark roads call for light and creativity – and that's where Hatzolah excels, spreading light and innovation as it heals and saves.





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HATZOLAH INTERNATIONAL CONVENTION 2023/5783



Robyn Shapiro

Sixty-eight overseas delegates representing 28 different Hatzolah organisations from around the globe came together in SA recently.

After the success of the Hatzolah 2017 International Convention, it was decided to host the gathering once again in South Africa in June 2023. Springboarding off the previous event, this convention aimed to be bigger and better, extending delegates' medical and emergency care knowledge even further and creating a platform for skills transfer between the various Hatzolah organisations represented.

Delegates from the United States included: Florida, Houston, Chicago, Lakewood, Central Jersey, Boro Park and Crown Heights Hatzolah organisations. The United Kingdom included: Stamford Hill, Edgware and Hertfordshire Hatzolah organisations. Australia Hatzolah was represented by Melbourne and Sydney. Israel United Hatzalah and Beit Shemesh were represented, and from Belgium, Hatzolah Antwerp was showcased. In total, there were 68 overseas delegates representing 28 different Hatzolah organisations from around the globe.

All delegates either covered their own expenses or their organisations paid for them to attend.

Running for eight days, the first three days of the convention focused on skills transfer and knowledge sharing, including presentations, debates and panels, held at the Wanderers Convention Centre. The volume of presentations and calibre of presenters were truly unprecedented. Lectures were given by both local and international professionals in their field of expertise. Roughly 18 lectures lasting 20-25 minutes filled each day, ranging from pre- and post-hospital care, new medical techniques and equipment, medical and ethical debates, emotional and mental healthcare, new research findings and in-person patient recovery stories. Delegates were given hands-on experience with new medical techniques and equipment and taken on excursions to private and public hospitals in Gauteng and the National Airways Corporation HELI Base. The days were long and intense but truly invigorating.

The learning continued as the group boarded a bus to take them on a once-in-a-lifetime trip to the Kruger National Park. Night and early morning safaris provided guests the opportunity to see the best of South Africa's wildlife up close, offering a unique experience for all. Being in the Kruger, surrounded by nature's beauty is always a spiritually uplifting experience. Coupling this with Shabbos ushered in a serenity that nourished the souls of those who are always giving to others. As night descended and the aura of Shabbos blanketed the group, each Hatzolah organisation united as one, filling the star-studded sky with the melodic sounds of Lecha Dodi. Every unique sect of Judaism was proudly represented as individual Hatzolah organisations danced together, *Am Echad B'Lev Echad* – as one *kehilah*.

> ***"Each Hatzolah organisation represented is unique, each with their own culture and meeting their community's personal needs."***

Each Hatzolah organisation represented is unique, each with their own culture and meeting their community's personal needs. But what ties them all together is their desire to selflessly serve

their community with unwavering *emunah* that they are doing Hashem's work for His people, without any desire for praise or reward in return.

The convention provided these individuals not only an opportunity to upskill their medical knowledge and treatment techniques, but a physical respite and emotional solace in gratitude for all that they do for others. Friendships kindled at the first convention were reignited and new connections were made with the growing number of delegates. It is these connections and medical knowledge gains that propel Hatzolah organisations to keep advancing the services for their communities and ensuring they continue to provide time-sensitive, life-saving emergency care.

Each Hatzolah organisation is a true blessing, keeping the lifeblood of their community pumping. The aims of this convention surpassed the expectations of all those who had the merit to attend, catapulting them to keep moving forward – better and stronger than when they arrived – and igniting the flames for the next Hatzolah International Convention, *b'ezrat Hashem*.














HATZOLAH
MEDICAL RESCUE



LUKAS



Dr. Y. Bar-Nur







FEEL THE PULSE AROUND THE WORLD



Meet some of the members of Hatzolah from around the world who joined us at our International Convention in May 2023.



Name: Mark Surdut
From: Melbourne, Australia
Years involved: 10
Role in organisation: First responder

Tell us about your first shift: My legs started shaking and my back started spasming when the call went off.

Tell us about your most difficult shift: I make all calls difficult in my mind in order to give special focus to the matter at hand.

Do you have a humorous story to share? Many! I often talk to my South African patients in Afrikaans even though I've lived in Australia for almost 25 years.

What message would you like to share with your brothers (and sisters) of Hatzolah around the world? How blessed we are to be involved in this holy work!



Name: Zalman Cohen
From: Hatzalah South Florida
Years involved: 13
Role in organisation: Executive director

Tell us about your first shift: My first call was very memorable, as I was enjoying the day in the park with my family, and someone came running at me from the other side of the field to say that a small girl was having seizures. When I arrived, this child was in a serious condition. It hit me right away how real this was, and what an impact my training would have on the first day.

Tell us about your most difficult shift: The most difficult shifts are always involving sudden unexpected deaths, old or young.

What message would you like to share with your brothers (and sisters) of Hatzolah around the world? You are literally a piece in this larger puzzle of helping our brothers from all over the world – stay focused.



Name: Yoel Tesser
From: Central Jersey (Lakewood, Jackson, Manchester, Tom's River, Howel and Brick)
Years involved: 15
Role in organisation: Former captain, currently paramedic ALS

Tell us about your first shift: The call came out as a simple lift assist and I pulled up on scene first and everyone was standing outside, screaming at me to run to the patient, who had just passed out. It turned out to be a serious call. Lesson learned from then on. Never take any call that you are dispatched to lightly until you get to the location and do a proper patient assessment and then determine the severity from there.

Tell us about your most difficult shift: Most difficult calls are psychiatric emergencies, because you know that this patient, no matter what, will be dealing with this challenge for the rest of their lives, as opposed to most medical calls where there is usually an end game.

Do you have a humorous story to share? I've answered for a call in my sleep in the middle of the night, saying that I'm at the location where the call was (a nursing home facility), when I was in my own bed. We get these funny things every once in while in the middle of the night.

What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Hatzolah members are held to a higher standard when it comes to medical issues; so many people ask us our advice with so many things. I think we must look at ourselves as role models and act to a higher standard in our daily lives, because people look up to us and it's our responsibility to be an example of what a good, caring Jew represents.



Name: Yitzchok Grosskopf
From: Hatzola Herts and Hatzola North London
Years involved: Herts – since inception (2 years); North London for 10 years
Role in organisation: Herts – trustee and ALS responder; North London – ALS responder
Tell us about your first shift: I first started out in MDA 16 years ago. I vividly recall completing my training and was anxiously looking around for people to 'drop' so that I could save a life :) The reality, however, was rather different and my first shift was a welcome to the understanding that the term 'emergency' is relative to the caller. Our role is mostly around preventing worsening of the patient's condition, pre-empting the requirement of life-saving interventions – a lesson that stuck with me throughout my Hatzola career.
Tell us about your most difficult shift: A few years back, while I was not on shift (is that even possible for a Hatzola responder?) I was on holiday with my family in Spain. During a BBQ, my 3-year-old cousin was found unresponsive in the pool. Working on a family member is hard enough, make it a 3-year-old and your perspective on life changes. Resuscitating Rafi alone for the longest 22 minutes of my life, waiting for the local ambulance service to arrive, made me acutely aware of how we take Hatzola for granted. An experience that I will never forget and has changed me in ways difficult to imagine.
What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Times arise where obstacles in many different formats, shapes and sizes can get in the way. Something that has always worked for me, while not always easy to practice, is to bring it back to basics, much like a complex call requiring us to keep revisiting our core, fundamental DRABC approach. The 'big picture' approach is key in every decision made as well as the recognition of humans and their limitations set by the Creator of the universe.



Name: David Fishman
From: Hatzalah of Houston
Years involved: 7
Role in organisation: President, founder and supervisor – paramedic
Tell us about your first shift: My first shift was on a Sunday and was super-suspenseful, since we didn't know when the first ever Hatzalah call was going to come in. Our first call came in on our first Shabbos and was very exciting. We were B"H able to help the patient and get the patient to the hospital where they needed to go. We quickly realised how important patient advocacy was on this first call.
Tell us about your most difficult shift: My most difficult calls are when a patient doesn't make it. We responded to an unconscious patient. When we arrived, the patient was apnoeic and pulseless. We quickly initiated CPR and requested for ALS intervention from our city fire department. We did all that we could, going above and beyond to save this patient, but the patient ultimately did not make it. For Hatzalah members, responding to calls like this can be emotionally draining, since most of our patients are in our community and we have known them for many years. Any loss is very difficult for all responders and dispatchers involved.
Do you have a humorous story to share? It was quite humorous when someone called Hatzalah wondering if we could help them get into their car that they locked their keys in.
What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Hatzalah responders and dispatchers are messengers of Hashem. We do our very best to help everyone and anyone, regardless of race, religion or ethnicity. It is ultimately up to Hashem on what the outcome will be. Give it your all to help in any capacity that you can. Keep up the amazing work! #HatzalahSavesLives





Name: Shaya Goldmeier
From: Chicago
Years involved: 12
Role in organisation: Coordinator

Tell us about your first shift: Nervous, anxious, excited and overly confident. This may not have been the very first shift, but one of them. Then we got a call for a paediatric seizure at around midnight on Friday night. Turns out it was a 1-year-old child of a good friend of mine. We managed care correctly. It was reported to the parents and hospital what a great job we had done as this was our first interaction with 911 and a serious call. The funny part was a whole bunch of our responders wanted to go on the call, so they piled into a car and drove over and then piled out – it was like a clown car, they just kept coming. We, on scene, just kicked them out of the house. We have since worked out those kinks.

Tell us about your most difficult shift: I have worked on patients that are so close to me, I consider them second parents or very good friends. I have dealt with many kids. I was not at the scene but had to run the QA/QI for this paediatric trauma that did not end well due to the level of trauma to the child. Many responders were greatly affected by this call, and it hit me too, just trying to review it with the crew.

Do you have a humorous story to share? This is both sad and funny. I got a call for an EDP. I get on scene and it's two friends of mine, with one holding his hand up in the air. The second friend says: "He's having a mental breakdown and I'd like to get him to the hospital using his cut finger as an excuse." I hear next to me my fellow member say to the patient: "Hold on, I'm confused. You're telling me all about a cut on your finger. We were called for an emotionally disturbed person. Are you the emotionally disturbed person?" OMG!

What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Always remember it's about the patient. Someone called you into their home or space for help, something most people are loathe to do. Also, pain is pain is pain – treat it. We are not here to judge.



Name: Yanky Schleimer
From: Bet Shemesh
Years involved: 6
Role in organisation: EMT

Tell us about your first shift: My chavrusa and I took a patient with difficulty breathing to an out-of-hours doctor facility after midnight. After getting home from the call, we were called back to further transport the patient on to a hospital. A 45-minute call turned into well over two hours.

Tell us about your most difficult shift: Trust me, people don't want to know.

Do you have a humorous story to share? We had a patient who hadn't taken his medication and his wife insisted he go to hospital (nothing was wrong with him). He was insistent on going to one he hadn't been to so they wouldn't have his records. We managed to persuade him to go home and take his meds and that he didn't need an ambulance.

What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Keep it up! Even when it seems it's not worth it anymore, there's that one call that'll be your entire purpose for joining.





Name: Aryeh Cohen
From: Hatzola Herts and Hatzola Edgware
Years involved: Herts – since the beginning (2 years); Edgware – since the beginning (9 years)
Role in organisation: Herts – trustee and BLS responder. Edgware – BLS responder
Tell us about your first shift: I remember the adrenaline spiking when the radio went that first time. Trying to keep calm and drive with all sorts of scenarios rushing through my head. Actually on scene I was much more relaxed, though, as the months of training kicked in. I can't remember the call details and it was probably not that exciting, but the feeling of exhilaration after helping that person will always stay with me.
Tell us about your most difficult shift: Calls during Covid were difficult. The smell of hand sanitiser still triggers the feelings of fear that were spreading at the beginning of the pandemic. It was the stories that people were telling about patients going into hospital relatively healthy and never coming back out that really made an impact on the people we were transporting. The fact that we were bundled up like something out of a horror film definitely didn't help. They thought they would never see their families again. B"H, most of them did.
Do you have a humorous story to share? The waiting time for the national ambulance service in London is terrible. We attended a call for an elderly patient who had fallen down a flight of stairs one evening. He was actually okay and refused to go to hospital, so we left him at home. The next day we had a call to the same address where he had again stumbled and fallen. This time, we convinced him to allow us to take him to be checked out. A couple of hours later, we returned to pick up our private vehicles from outside his house and found two ambulance crews looking for their patient... they had been called the night before and had only just turned up around 12 hours later! They were quite put out when we told them their missing patient was being looked after in hospital already!
What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Don't let anything distract you from what is really important. Saving lives and helping those in the time when they feel the most vulnerable is the reason we signed up.



Name: Elad Finch
From: HBS – Hatzala Beit Shemesh
Years involved: Around 13
Role in organisation: Paramedic and medical manager
Tell us about your first shift: My first call was a child hit by a car.
Tell us about your most difficult shift: Going to do CPR on a baby that was fine the day before and got dehydrated. The baby didn't make it, and everyone was devastated and shocked. The baby was the same age and had the same name as my son. I found myself crying with the father in the emergency room. The father refused to believe that his son would never wake up.
Do you have a humorous story to share? A few years ago, I was passing by a bus stop, and I saw a lady get off with a baby in her hand. I stopped to help her take her stroller out from the bottom of the bus. Right before I continued on my way, she told me: "You delivered this baby!"
What message would you like to share with your brothers (and sisters) of Hatzolah around the world? Stay humble, respect everyone and take a lesson from each call.



TAKING THE HOSPITAL **TO THE AIR**



Dr Asher Lewinsohn

Just another day on the job working for an air ambulance team in the UK.

Dr Asher Lewinsohn is the medical director of Hatzola Herts Ambulance Service and senior medical officer for Hatzola Edgeware both in the UK. Dr Lewinsohn is an anaesthetic and intensive care consultant in the UK and has over eight years' experience working in medical helicopters in the UK. Dr Lewinsohn attended the recent convention in South Africa, where he was one of our noted guest speakers. We asked him to take us behind the scenes into a helicopter emergency medical service (HEMS).

Medical helicopters (referred to as HEMS services) are used all over the world where the patient is too far from the nearest hospital to be transported safely and quickly by ambulance. In South Africa, Hatzolah uses the Netcare 911 HEMS on the rare occasion that one of our patients needs to be flown. This is not the norm as a result of our proximity to numerous hospitals. It is almost always quicker to get the patient to the hospital by ambulance.

As we hover 1 000 feet in the air, slowly descending, a strange sense of peace permeates the cabin. It's an eerie feeling of calm before the storm that no one speaks about and is hard to explain. Despite this, there is also a real sense of purpose among the team, as our hearts race despite the calm demeanour on the outside.

We're hovering 1 000 feet above a road traffic accident and can see one patient already in cardiac arrest, with the land crew performing CPR on them; a second looks to be in a bad way, covered in blood and being attended to by a second crew; and a third patient remains trapped in the car with the fire service attempting to get them out.

When I visited South Africa and saw the Netcare 911 helicopter team at work, it was amazing what fantastic work was being done.

We have around 21 separate air ambulances operating across the UK. These teams essentially bring the Emergency Department to patients who have suffered a life-threatening or life-changing trauma or medical emergency and provide advanced critical care (usually only found in the hospital resus department – like blood, advanced resus techniques and even open-heart surgery) at the roadside at the point of injury.

On average, an air ambulance can reach someone in urgent need in any region within the UK in 15-20 minutes of a 999 call being made, and air ambulances are collectively dispatched to over 100 lifesaving missions each day across the UK. What's more impressive is that every mission is funded almost entirely by charitable donations and the generosity of local communities, and comes at no cost to the patient or the NHS.



> ***"On average, an air ambulance can reach someone in urgent need in any region within the UK in 15-20 minutes of a 999 call being made."***

The role of my HEMS doctor work is different from my hospital work in that it involves being there in the crucial first few minutes of the patient's fight for life, without the backup of a large clinical team or the hospital resus department. When you're at the roadside in the middle of the night, you're that patient's only chance. There's a sense that if you weren't there, no one else would be, and every extra moment for that patient depends on what you choose to do next. When you successfully tip the balance in their favour to survive, it's because you got there just in time to give that extra level of care when it really mattered.

The success of ambulances (air or land) hinges on the familial bond among the crew. Everyone is professional, the training and kit is top-class, but the atmosphere is warm, welcoming and kind. As a team, we regularly review cases together to see what we can learn and how we can grow as a team.

Outside of my air ambulance work, among other roles, I am medical director for Hatzola Herts and senior medical officer for Hatzola Edgware. In these roles, I build on my pre-hospital experience, but most importantly, I love the sense of 'giving back' to our community and being able to bring my critical care experience and seniority to the roads and the air.

The rest of my working week is mostly spent as an anaesthetic consultant in a local hospital, and as a substantive consultant in the Adult Critical Care Transfer Service (ACCTS) within the NHS, where I help transfer critically unwell and often critical patients between NHS hospitals when they need escalation of care or services that might not be provided in the hospital they're currently in. This helps me to keep my clinical skills practised and retained and provides the perfect mix of experience between the emergency/urgent and elective (or planned) patient care.

At the end of the day, however, one of the most important parts of my job (regardless of whether it's the air ambulance, NHS or Hatzola) is being a friendly face to people who are having the worst day of their lives. You can't perform this role without being a 'people person', trying to keep that 'human connection' while remaining professional, calm and calculated in everything you do. In a nutshell, it's about being a *mensch*.



These are aspects that just can't be taught, but people who do this kind of work with me (like Hatzola responders) have this innate ability. Most of you reading this know about the sad passing of one of the South Africa Hatzolah team – Chaim Sarchi. Chaim was my first cousin; we grew up together. Chaim was the biggest *mensch* I ever knew and had one of the deepest and kindest hearts that you just don't see anymore. I will forever be grateful that I got one last chance to spend some time with him at the recent international Hatzolah conference in South Africa.
I will forever remember that kind smile and cheeky laugh.

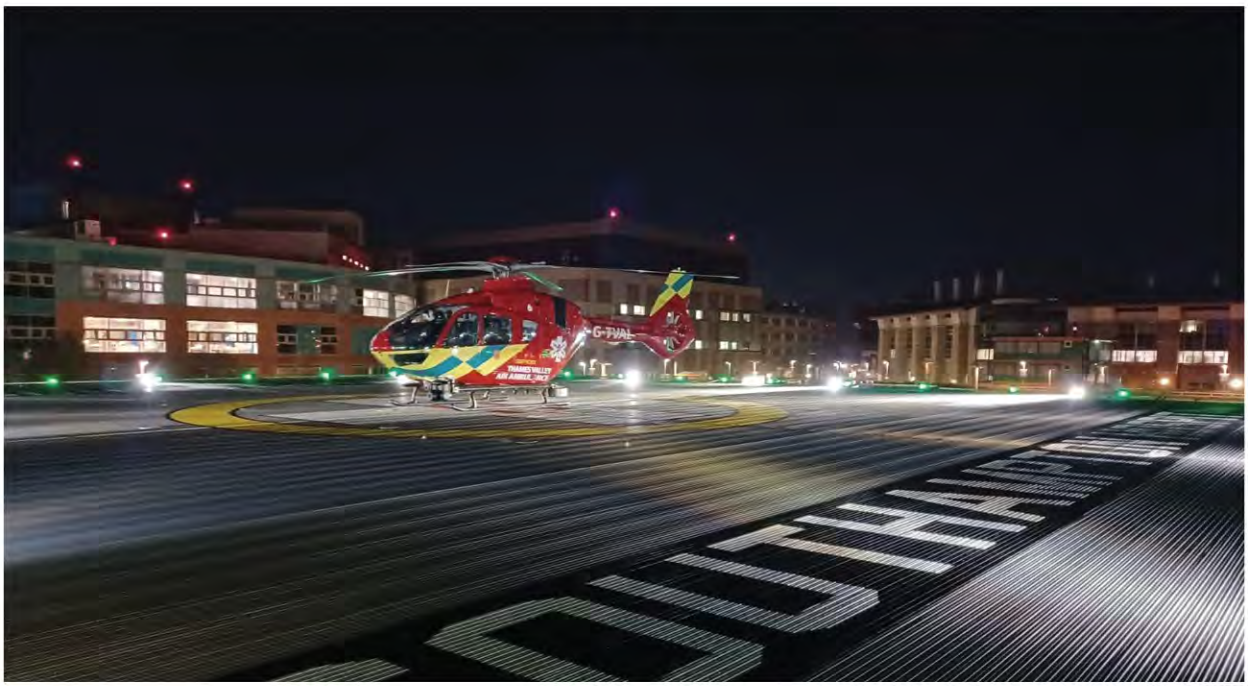
This article is dedicated to the memory of Chaim – you will forever be missed by me personally and by all of us as a team, but will be remembered forever in the work we do and the kindness we share. Thank you for the kindness you shared with me – always being there whenever I needed you.

Baruch Dayan HaEmet, may the memory of the righteous be blessed. Rest easy my cousin, we have the watch from here.

Dr Asher Lewinsohn is an anaesthetic and intensive care consultant working in the NHS. He is an experienced HEMS doctor with over eight years' experience. He is the medical director and course lead for the Resus Council UK as well as the medical director of Hatzolah Herts Ambulance Service volunteer group. And he even finds time to spend with his wife and two girls.









HATZOLAH **NEEDS YOU**

Rabbi Yecheskel Auerbach

MAKE THE IMPOSSIBLE, POSSIBLE!

Hatzolah has been serving our community for many years, performing the most incredible mitzvah of saving lives.

Now is your opportunity to join this organisation and ensure it can carry on its holy task for many more years. You may think that you are not cut out for this endeavour. But listen to this true story and Torah idea.

A group of communal activists were called to a meeting chaired by the venerable Rav and Rosh Yeshiva Rav Meir Shapiro of Lublin *zl*. The subject under discussion concerned saving people's lives. Some of the attendees responded: "What needs to be done is simply impossible and cannot be successful."

Rav Shapiro cited the well-known story of Pharaoh's daughter, who went to bathe in the Nile River and noticed a baby, far out of her reach, floating in a box. Despite the impossibility of her effort, she nevertheless stretched out her arm – and Hashem did the rest. Miraculously, she was able to reach and save little Moshe's life.

The Kotzke Rebbe asks why she stretched out her arm in the first place. Didn't she realise that it would be impossible to reach him? He answers that a human being must always do everything in his power in order to save the life of another human being. Even if it seems like an impossibility, he must attempt the impossible – and many times, with the help of the help of Hashem, he will succeed when he thought it could not be done.

In the name of Hatzolah, I strongly urge and encourage the members of our wonderful community to join this worldwide organisation. See how you can become part of this amazing mitzvah of saving lives.

With best wishes for continued *hatzlacha*.

"A human being must always do everything in his power in order to save the life of another human being."



FUTURE@HATZOLAH

Darren Kahn

The programme sends future volunteers on either the one- or two-year full-time courses with a higher certificate in emergency medical care.

We have been privileged to be able to serve our community for the past 25 years. Our core function remains emergency medical response. Our dedicated and committed team is available 24/7 365 days a year.

Our operational team includes responders, dispatchers, crisis response unit and assist members. Each team fulfils a crucial role within the organisation.

In order to operate and serve our community efficiently, we operate with both primary and backup responder teams. This allows us to service our average of seven calls per day.

In order to qualify as a trained medic, the shortest available course currently is a one-year full-time diploma. Unfortunately, there is no intention from the Health Professions Council to re-introduce the shorter part-time courses.

We are offering to send future volunteers on either the one- or two-year full-time courses with a higher certificate in emergency medical care. We are looking for passionate individuals who want to make a difference. Responding saves lives. We will grant you a full bursary and at the same time you can earn a salary. Thereafter, you too can be part of this amazing team serving our wonderful community.

Please email us on **future@hatzolah.co.za.**

Avi Smith, who is currently on our FUTURE@ HATZOLAH programme, says he chose to partake in the ECA course due to his lifelong passion for emergency medical services, which began when he was a child. The prospect of serving our own community through volunteering at Hatzolah adds an immensely rewarding aspect to this decision. He says the ECA course spans over two semesters and covers a range of essential modules. Students delve into subjects like anatomy, physiology, EMC theory, EMC practicals and clinical practice. Additionally, the course incorporates a rigorous physical training component, encompassing activities such as running, swimming and lots of burpees.

Netanel Levenstein is also part of our FUTURE@ HATZOLAH programme and has been involved in Hatzolah since 2018, when he completed the Hugo's Heroes course. He was involved during the Covid-19 pandemic as both a wellness caller and a wellness driver. Being a part of Hatzolah led him to continue with his passion for helping others by studying to become a paramedic. He is currently studying the two-year course, which is a Diploma in Emergency Medical Care, through the Faculty of Emergency and Critical Care at Netcare Education. This course will give him a wide range of skills and treatments, applicable to the emergency pre-hospital setting, allowing him to provide the best possible treatment to our community.

Since he can remember, he has always had a deep interest and passion for pre-hospital medical services. No feeling compares to being there for others in their time of need, especially a fellow community member, he says. When given the opportunity to complete this course through Hatzolah, he agreed immediately. To be a part of a one-of-a-kind organisation that has the ultimate goal of treatment excellence is a privilege he says he could not compare to anything else.

"Hatzolah is a family and being able to have people to lean on, learn from and get guidance from at any time of the day is a privilege I will be forever grateful for," he says.


2024
FUTURE @ HATZOLAH
MEDICAL RESCUE
BECOME A QUALIFIED MEDIC. EARN WHILE YOU LEARN.
One-year full-time course to become a certified medic.
Fully paid bursary to cover your training expenses.
Monthly salary while you study.
Opportunity to WORK alongside our medical team.
REGISTER NOW
WhatsApp: 072 179 6197
Email: future@hatzolah.co.za
YOUR FUTURE IS NOW!
Be the person you always wanted to become,
make a difference and change lives.

TEACHING OUR COMMUNITY **TO SAVE LIVES**



Lauren Rubin

The Hatzolah Medical Rescue Training Centre provides courses for beginners and experienced medical professionals.

The Hatzolah Medical Rescue Training Centre is a solid testament to the organisation's dedicated commitment to equipping volunteers and community members with exceptional expertise. The courses are designed meticulously, covering various medical scenarios from minor injuries to critical emergencies.

At the core of this training lies cardio-pulmonary resuscitation (CPR), a fundamental skill that can save lives in the critical minutes before professional medical help arrives. The Training Centre offers a range of courses tailored for beginners and experienced medical professionals, ensuring everyone gains the potential to save lives.

Acknowledging the impact of pre-emptive measures, the centre is broadening its curriculum to include Fire Prevention & Emergency Readiness, providing invaluable insights into fire safety protocols and equipping individuals to handle fire-related emergencies adeptly.

The Stop The Bleed course imparts knowledge on managing severe bleeding and using tourniquets effectively, guarding against life-threatening haemorrhages.

One of the centre's hallmarks is its use of state-of-the-art technologies.

What participants have to say about the Hatzolah Medical Rescue Training Centre:

"Brilliantly presented. The course was clear, relevant and practical."

"Excellent, interactive and informative course."

"The course was very comprehensive and thorough. I feel prepared should I ever need to do CPR."

"Excellent course! The content was clear and precise. The instructor was passionate and enthusiastic."

Trainees confront meticulously recreated emergency situations, gaining practical experience in a controlled setting. This hands-on exposure is essential when facing the unpredictability of real-life emergencies.

A distinctive aspect that sets Hatzolah Medical Rescue apart is its profound integration within the communities it serves. The Training Centre serves as a vibrant hub where medical skills are honed and connections are forged between volunteers and community members.

In the fast-evolving field of medical care, complacency is not an option. The centre's commitment to continuous education ensures that both Hatzolah Medical Rescue volunteers and community members remain at the forefront of knowledge. Regular workshops, refresher courses and exposure to emerging medical technologies guarantee that all individuals continue to ensure the highest level of care and awareness.

Through comprehensive training in essential techniques – CPR, first aid, responder skills, fire prevention, and Stop The Bleed protocols – coupled with innovative simulations and a community-centred ethos – the centre sparks a transformative journey.

The Hatzolah Medical Rescue Training Centre stands as a steadfast testament to the organisation's unwavering commitment to equipping volunteers and community members with unparalleled expertise.

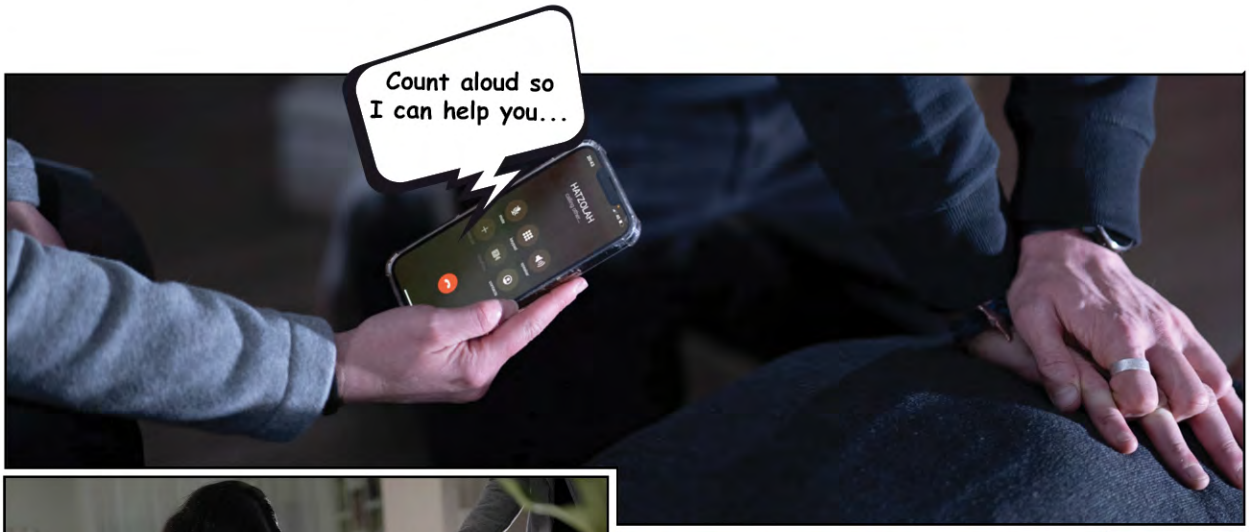


To book your course email training@hatzolah.co.za


PUSH HARD
PUSH FAST!!
CPR SAVES LIVES!
FAMILY TIME...
LIGHTS GO OUT, another night of load-shedding...
Dad, please check the inverter
ARGHHHH!
KA POW
DAD! DAD!
CALL HATZOLAH!


083 222 1818
Call coming out electrocution....
Bystander CPR in progress
Liav responding
It's going to be difficult in the dark
HEADLAMP ON...


LIAV ON HIS WAY TO THE SCENE...
I.L.S MEDIC
Josh Green responding
You are doing a great job...
PUSH HARD PUSH FAST!!

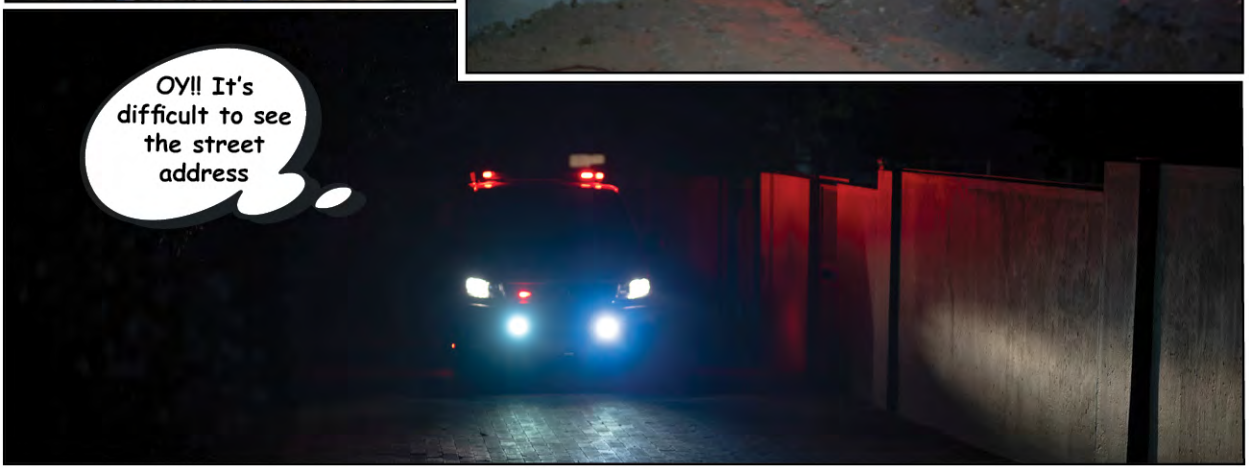

Count aloud so I can help you...


Swap if anyone else knows CPR


BOOMED NEIGHBOURHOOD


DIFFICULT TO NAVIGATE THE ROADS IN THE DARK...
40


I must avoid the potholes


OY!! It's difficult to see the street address

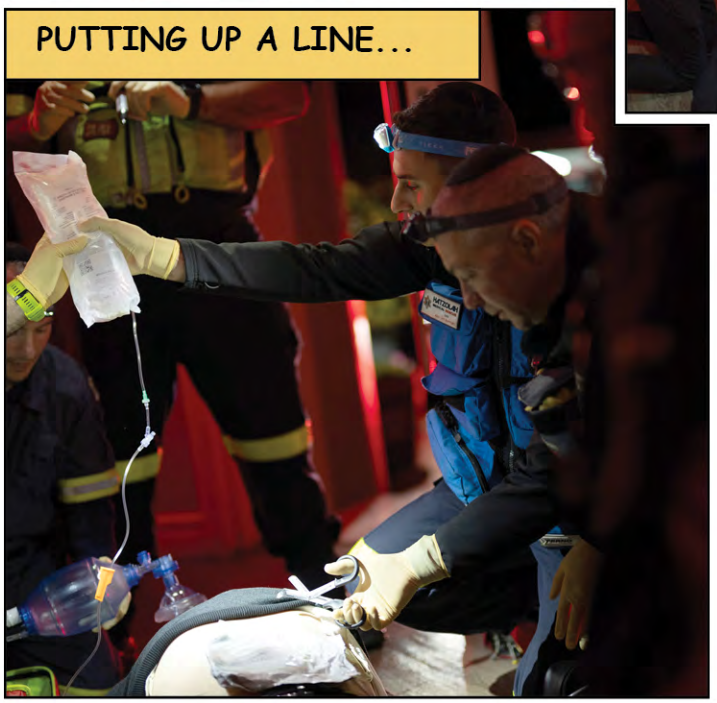


RESPONDERS ARRIVE AT THE SCENE...





PUTTING UP A LINE...



DRAWING DRUGS...




BVM TO HELP WITH BREATHS...
Compressions 100/120 per minute
SHOCK ADVISED!
CRU...
You were amazing, you saved his life
CRU DEBRIEFING MOM...

LOADING THE PATIENT IN THE AMBULANCE...

...to MILPARK

ARRIVE AT MILPARK...

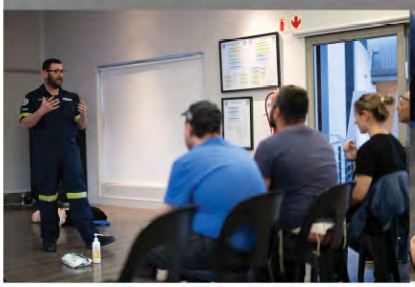
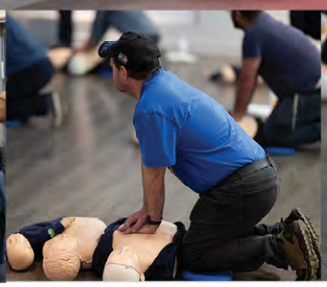
EMERGENCY MEDICAL SERVICE

AMBULANCE

HANDOVER TO MILPARK ER

Baruch Hashem! He's going to be ok!!

THESE HANDS COULD SAVE A LIFE!



Anytime, anywhere, somebody may need your help.
You can make the difference and help save a life.

Be prepared and learn CPR

HATZOLAH
TRAINING FOR LIFE

FAMILY & FRIENDS CPR • CPR FOR EVERYONE • BLS (BASIC LIFE SUPPORT) PROVIDER
CPR FOR PROFESSIONALS • FIRST AID ESSENTIALS FOR CHILDREN
HEARTSAVER FIRST AID, CPR AND AED • ACLS - ADVANCED CARDIOVASCULAR LIFE SUPPORT
PALS - PAEDIATRIC ADVANCED LIFE SUPPORT

CALL 0860-100-101 OR EMAIL TRAINING@HATZOLAH.CO.ZA to book your course.



A 20-YEAR PULSE

Sue Chalom

DEDICATED DISPATCHER TANYA JOSELOWSKY

Despite having worked as a dispatcher for two decades, Tanya Joselowsky is adamant when she says: "It is not me doing this *chessed*, it is my family." She highlights the significant sacrifices made by her husband, Darryl, and daughters – Nurit, Sara and Ella – whenever a crucial Hatzolah call supersedes their own needs, even on Shabbos and Yom Tov. "They are just a part of it and never complain if I choose to take on another shift. Hatzolah is an integral part of our lives."

Darryl reiterates: "Our family has been privileged to experience Tanya's total dedication to Hatzolah first-hand and we do not, for one second, want it any other way."

Apart from the unwavering support of her family, her motivations for volunteering encompass two aspects: a profound faith in the organisation as a whole and a genuine desire to dedicate time from her weekly schedule to assisting others. She is drawn to the incredible level of compassion that is uniquely evident within Hatzolah, a quality that distinguishes it from any other ambulance service. Whether she's witnessing the team's remarkable efforts on the scene to support a family or observing their willingness to go above and beyond the boundaries of emergency care. As an example, during Covid, Hatzolah would take family members in the ambulance so they could participate in the funeral of their loved ones.

It is about one Jew caring for another Jew. She realises that she is an integral part of something bigger than herself.

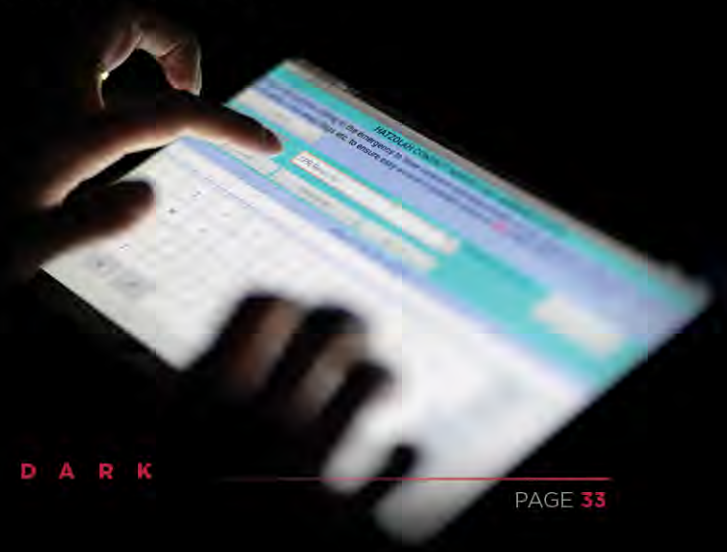
Tanya is humble when speaking about the demands of being a dispatcher and crisis response unit (CRU) member, and she knows not to become complacent, as there is always something more to learn in these roles. One of the challenges of being such a streamlined, efficient organisation is that "so much more is expected of us" by the public, who may not know that it is not a qualified doctor but a trained volunteer on the other end of the call.

Tanya says so much has improved in the organisation since she began. "One thing that hasn't changed, is the exceptional kindness and passion of our team. I believe that's what drives us all."

Tanya's attitude to her role reveals a balance of empathy and well-defined boundaries cultivated through her years of training and experience. She has learnt to focus on managing the crisis and not on controlling the outcome. In terms of the CRU work, her goal when leaving the scene is leaving the trauma behind too. It is not necessarily the complex trauma cases one would expect that affect her. Often, it is those that come out of the blue. If she is still thinking about them a few days later, then this is a signal for a debrief. "It's about asking for help so that I am fresh and ready for my next shift. I have to be in a good enough space to help someone else," Tanya says. She will call one of the dispatchers to debrief after a tough shift or difficult case.

And then there are moments of impact. When Tanya arrived at a family's home to discuss balloons for their son's bar mitzvah (she is the owner of The Pop), the barmy boy's mother reminded her that she had dispatched the call for her sick baby 13 years prior and, thanks to Hatzolah saving his life, he was able to celebrate his bar mitzvah.

Tanya attributes her 20 years as a dispatcher for Hatzolah as being part of her personal journey: "Hatzolah saved my life. It gives as much to me as it does to our community."





A TRIBUTE TO **CHAIM SARCHI**

Ronit Janet

A man among men, Chaim's passing has left a huge void in our lives that will never truly be filled.

Your attention please

All responders stand by...

All responders stand by...

Sarchi come for dispatch...

Sarchi come for dispatch...

Sarchi come for dispatch...

Last EMS call for Sarchi...

Chaim Sarchi ..... not responding ....

Chaim Sarchi, BLS medic, member of MCI Team, former dispatcher, former full-timer, and Baal Chesed with Hatzolah since 2007.

A truly valued colleague and friend whose dedication touched the lives of so many people.

We thank you for your service and commitment to the service.

Gone, but not forgotten.

Our thoughts and prayers are with your family, friends and colleagues during this difficult time.

You are now off duty. Your shift is complete.

Rest easy Sir.

We have the watch from here.

These words rang out over the Hatzolah radio system as the entire Hatzolah fleet and 60 or so other cars escorted fellow volunteer Chaim Sarchi on his final journey to Westpark Cemetery. There was not a dry eye for those who were listening to the Final Call Ceremony – a heart-breaking practice carried out as a sign of respect for emergency personnel who have dedicated their lives to the community. All radio traffic ceases as the call is made live over the air. This simple yet highly emotional salute speaks to the very core of one's soul. It provides a haunting reminder that there is now a huge void in our lives that will never truly be filled.

These simple words speak volumes. Even now, weeks later, we are still without words to describe the barren, empty space left behind by our friend, our brother, Chaim Sarchi. And yet we cannot miss this opportunity to remember him – as our brother in blue. A man among men, a responder with a heart so big and an ego so small.



Eli Lewenstein, fellow long-time responder, remembers Chaim during the early days of Hatzolah, where the two of them would wait at the ambulance base for a call to come through. During that time, there were no rosters or backup shifts. And there were times when no official teams were on duty. These two young men would be ready to respond. That was when their deep friendship formed. With no lights and sirens, but rather magnets stuck to the side of the car and flashing hazard lights, Chaim played a key role in ensuring Hatzolah could be the organisation it is today.

But what was truly memorable was not the hundreds of calls he responded to or the calls he dispatched. It was how he never forgot that this moment for the patient in front of him was the worst time in their lives. His kindness was unsurpassed. He would make a patient smile with his own unique brand of humour.

a powerful thank you letter from the head of the emergency department of Morningside Clinic, specifically thanking Chaim for going above and beyond when volunteering to go back to a patient's house to obtain essential medical information, lock up the house and return the keys.

Lewenstein shared that whatever Chaim did, it was with his whole heart, and when he married Liat and began his journey as a father, he prioritised his family with the same passion as his EMS care. But none of this was done for the glory. In fact, most were under the radar. During Covid, he and his brother began a chaplaincy programme to ensure that all members of the community who found themselves in state hospitals would have food, comfort and a smiling face during their difficult time. The programme worked on developing strong relationships with those on the ground of the hospitals, and Chaim had a remarkable way of doing just that. He was, in fact, one of the volunteers who answered the call to assist with the neonatal ward while the nurses of the Joburg Gen went on strike.

Avi Joseph shared a Saturday night shift with Chaim for a number of years. During that time, Avi reflected how Chaim truly exemplified the essence of *chessed*, the act of selfless kindness and benevolence.

"Chaim's commitment to *chessed* extended beyond simply giving money or resources; I personally witnessed him wholeheartedly investing his energy and compassion into uplifting others.

"It is not often that we come across someone who consistently puts others before themselves, tirelessly dedicating their time and efforts to helping those in need. Chaim embodied these qualities and more throughout his short life," Avi said.

"In a world where acts of kindness can sometimes be overshadowed by self-interest and personal gain, Chaim served as a constant reminder of the power of *chessed*. His unwavering commitment to uplifting those in need was truly exceptional, and I have no doubt his legacy will remain etched in the hearts of all who have been fortunate enough to be touched by his acts of kindness. Chaim's actions left a lasting impact on the lives of countless individuals he touched, and on me in particular. There were countless times when I sat in the driver's seat of the ambulance while Chaim treated and reassured a traumatised patient before we took them into the casualty."

Chaim's *chessed* began as a young boy riding his bicycle to collect the Hatzolah tins from various shops. He swept the ambulance cage – no work was beneath him. He was a Chassid in his entirety – whether it be in his learning, putting on *tefillin* for soldiers going into Gaza or his early ambulance work at Kfar Chabad.

Chaim was working on another project that was not completed before his passing. Chaim and Daniel Singer were working on ensuring every ambulance or response car would have a Chitas (complete book of Chumash, Tehillim and Tanya) in it. He had been fundraising and was working on this when he passed. The project has been completed in his memory.

As a Chassid, there were no eulogising words spoken at his graveside. But the sirens of the procession that escorted him spoke in their place. The silence of the thousands of mourners who bowed their heads revealed far more than any *hesped.* The guard of honour wearing Hatzolah jackets and wiping their tears said it all.

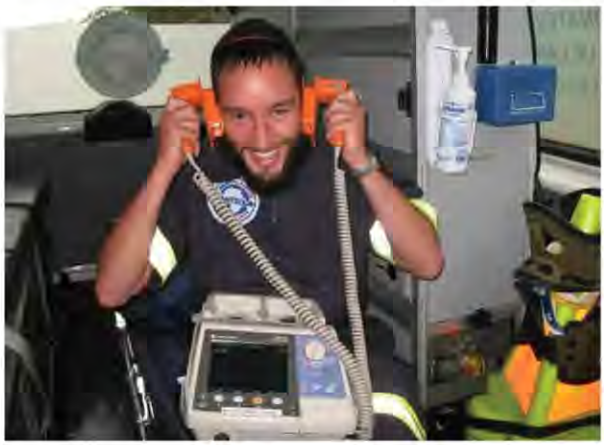
We are bereft at the loss of Chaim. Gone too soon.

You are now off duty. Your shift is complete.

Rest easy Sir.

We have the watch from here.





QUESTIONS

From a dispatcher to a CRU responder, a BA responder and a jack-of-all-trades – we get the low-down.



Q: Name?
A: Serenne Kaplan

Q: Role(s) in Hatzolah?
A: CRU responder

Q: Year joined?
A: 2018

Q: Why did you join?
A: I was excited to be a part of a ground-breaking, first-in-the-country Crisis Response Unit, whose members received specialised training by experts in the field from Israel. The idea of administering psychological first aid to people in distress on calls (bystanders, family members, etc), while medical intervention was taking place with a patient, really resonated with me. It seemed an impactful way of making a difference in a non-medical way to a traumatic scene.

Q: What's your best memory of the organisation?
A: I have so many indelible memories of being part of this exceptional organisation, but some highlights include team-building activities like a cook-off, and my first ride-along with Uriel Rosen, after which I required debriefing myself!

Q: What was your most difficult call and why?
A: All calls mobilising the CRU come with their difficulties, but ones involving infants and suicides stand out as the most challenging. There is so much pride in being a part of this stellar organisation, and it is nothing short of an honour to play a role in what Hatzolah does and the lives they save and touch daily.

Q: Can you offer words of advice to future volunteers?
A: The sense of camaraderie, support and care between members is humbling to see. Volunteering for Hatzolah has been an incredible learning journey for me.



Q: Name?
A: Akiva Suttner

Q: Role(s) in Hatzolah?
A: Past: Wellness driver, blood runner, Wellness caller and Wellness manager
Present: Assister, CPR instructor and full-time ride-along

Q: When did you join the organisation?
A: December 2020

Q: Why did you join?
A: I was approached during the second wave of Covid-19 and offered a job as a wellness driver, which involved dropping off monitoring equipment for patients who had signed up to the Wellness Programme. Shortly after, I moved into the position of blood runner, collecting the bloods samples taken by the nurses and dropping them off at the laboratory, and eventually worked my way up and became a Wellness manager. My enthusiasm to join this organisation was fuelled by my passion for assisting others in need.

Q: What's your best memory of the organisation?
A: I have made many great memories at Hatzolah, but it all comes down to making a difference during a time when it was hard to find ways of helping others, and it truly gave me a deep sense of purpose and fulfilment.

Q: What was your most difficult call and why?
A: The most difficult call is one in which we are dispatched to neglected and lonely patients who need Assist members, who they don't know, to help them off the floor and back into bed, with no family or any other relatives able to assist them.

Q: Can you offer words of advice to future volunteers?
A: It's about giving back to the community and helping others in need without any compensation or thanks needed.

"Some highlights include team-building activities like a cook-off, and my first ride-along with Uriel Rosen, after which I required debriefing myself!"



Q: Name?
A: Warren Bome

Q: Role(s) in Hatzolah?
A: BA responder

Q: When did you join the organisation?
A: About 18 years ago

Q: Why did you join?
A: For a long time I felt like I needed to make a difference in this world, and I experienced Hatzolah back then when, unfortunately, my mom had a stroke and Hatzolah arrived to help her. I was so blown away that I decided that's exactly what I wanted to do, thinking that I would be able to help.

Q: What's your best memory of the organisation?
A: The memories that stay with me include the camaraderie that we have between us and the events that we have when we get together and celebrate. Those are the things that stick in my mind – being with my fellow brothers and enjoying the time with them and getting to experience how amazing other people can really be in this world.

Q: What was your most difficult call and why?
A: My most difficult call and my favourite call is the time when we got called out to a lady who said that her waters had broken – she was about to have a baby. We arrived to find her standing outside with her bags packed. Unfortunately, she came from a very financially challenged family, and we had to take her to the Joburg Gen. And in the back of the ambulance, she was going through labour. We got to the Joburg Gen, I wheeled her out and as I was wheeling her out, the baby was crowning. I ended up delivering the baby on the stretcher in the hospital before getting to the labour ward. Thank G-d, mom and baby were well.
A few days later, we got a call to say that the family would love us to be part of the celebration and attend the *bris*. With permission, we attended. The *mohel* was a local doctor and the *bris* was being held in his rooms. We had this beautiful *simcha*, very humbling, with a few family members – and myself and Jason (my brother) – with a Coke and a milk tart. I remember singing and dancing around the coffee table in the waiting room with the family. It was probably the most awesome experience. They ended up naming the baby after me, so I have a little Warren Emanual ben Rafael running around in this world and I feel very privileged, honoured and blessed to be part of this experience.

Q: Can you offer words of advice to future volunteers?
A: Hatzolah has taught me not to take anything for granted. Appreciate what you have, especially your health, live life by making a difference and helping your fellow community members and fellow human beings.



Q: Name?
A: Romy Greenberg

Q: Role(s) in Hatzolah?
A: Volunteer dispatcher

Q: When did you join the organisation?
A: 2018

Q: Why did you join?
A: I always wanted to try and contribute to the community in some way or another and volunteering for Hatzolah was the best way to do that! It's my way of giving back and helping others.

Q: What's your best memory of the organisation?
A: When I joined Hatzolah, there was a group of about five of us who went through a few weeks of intense training. Although it was beyond stressful, I think it is also my best memory of the organisation. It was amazing to see the amount of time and effort that was put into each and every one of us to ensure that when that phone rang for the first time, we were ready! And that is something that continues to this day. There is always someone to turn to and ask for help, and although that's not necessarily a memory, it's something that has stayed with me throughout my years of volunteering.

Q: What was your most difficult call and why?
A: It's hard to pinpoint one specific difficult call as there have been a few, but the type of call I always find hard to deal with are the calls when telephonic CPR needs to be administered while the team is en route. I always try to put myself in the caller's position and can't imagine what it must be like to try and help a loved one while you are trying to hold it together. We do our best to be there for the caller, but there's only so much that can be done over the phone, and I always find that hard to deal with.

Q: Can you offer words of advice to future volunteers?
A: Dispatching has been one of the most challenging yet greatest tasks that I've taken on. It's not easy, and I still get nervous every time that phone rings as you never know what you're dealing with, but it's also the most rewarding thing you can do. Something I always remind myself is that when the phone rings, it's because someone needs help, and I can be that person to provide them with the help they need! For me, that makes it all worth it.

ANSWERS

HATZOLAH **STEPS UP**

Ronit Janet

HATZOLAH ASSIST UNIT

"Among the calls received to the Hatzolah emergency line," says Yudi Singer, Advanced Life Support paramedic and manager of the Hatzolah Assist Unit, "are a number of calls that do not require an ambulance, but still require help. An example of this would be when an elderly person doesn't have the strength to get up off the floor and there is no one else available to help them. It can potentially be life-threatening to leave someone on the floor the whole night, especially if compromised and at risk for issues such as hypothermia. This is where the Assist Unit comes in."

Singer explains that new volunteers were recruited to assist with non-emergent calls (a call that does not require medical treatment). They can also recognise emergencies and activate appropriate resources when necessary. So when community members call the emergency line, there are more resources available to ensure they receive assistance.





Husband and wife Shai and Simone Weil are part of the Assist Unit. Simone says Hatzolah Assist calls could include helping a person who has fallen out of bed and lacks the physical strength to stand up, or aiding a person who has been discharged from hospital after a surgical leg repair and needs help getting into their apartment. While the Assist Unit does not transport patients, they are in contact with the dispatcher who can activate a team of paramedics as needed. Simone says the people who call often don't have anyone to help them – otherwise they would not be calling.

Hatzolah Assist recruits underwent a rigorous internal training programme focused on patient lifting, carrying and movement techniques. They met three to four times a week and were thoroughly trained – Simone believes the unit is well equipped to hold its own until responders arrive on scene in the event of an emergency.

The unit was trained in CPR and Stop The Bleed procedures, as well as in how to recognise a range of medical emergencies and identify when a patient is clinically deteriorating. They can escalate the call and activate an ambulance if this happens. The unit was also trained on the ethics around a call and sensitivity towards patients. This included the recognition of a patient's needs and rights according to South African law.

Hatzolah Assist began in February 2023, and the unit consists of 18 volunteers who are regularly rostered. Both male and female volunteers ensure that modesty will prevail when necessary. Shai says it's amazing to see how the unit comprises of so many people from different walks of life and experience, all eager to make a difference to those in our community who are in need.

ORGAN TRANSPLANTATION
HALACHIC PERSPECTIVES

Rabbi Prof Avraham Steinberg, MD

A crucial issue concerning cadaveric organ donation is the determination of the moment of death.

Organ transplantation is the procedure of replacing diseased and non-functioning organs, parts of organs or tissues with healthy organs or tissues. The transplanted organ or tissue can be obtained either from the patient himself (autograft), from another human donor (allograft) or from an animal (xenograft). Transplanted organs may be artificial or natural, whole (kidney, heart, liver, etc) or partial (heart valves, skin, bone, etc).

Artificial organs and parts

The use of artificial organs or tissues for transplantation poses no *halachic* problems if the prospects for success are greater than the risks.

Animal organs (xenograft)

If it becomes possible to use tissues and organs from animals (even non-kosher animals, including genetically adjusted pigs) for transplantation, there are no *halachic* objections to their use to save human lives.

Medical science, however, has not yet advanced to the point of being able to use either artificial organs or animal organs on a routine basis. Therefore, the only sources for organs are live or deceased human beings.

"All poskim agree that obtaining lifesaving organs from dead people is not only permissible but is a recommended act."



The *halachic* as well as legal and ethical concerns revolve around the donor, the recipient and society in general.

In this article, I will discuss only cadaveric donor transplants as they relate to the donor. Live donor transplants have different *halachic* issues.

Cadaver donor transplants

Some of the *halachic* considerations in the use of cadaver donors concern those relating to autopsy. These issues include the following:

- The prohibition to derive benefit from the dead.
- The violation of the precept of burying all parts of the dead and not delaying the burial of the dead.
- The prohibition of desecrating the dead by making an incision in the dead (ie, to remove an organ).

All these prohibitions apply only if the tissues or organs are not essential to save the recipient's life. However, most rabbinic decisors rule that if the transplant is done as a lifesaving procedure, all the above-mentioned prohibitions are waived.

Most rabbis nowadays allow cadaver organ donations for lifesaving situations. Some rabbis even consider it to be a mitzvah to donate one's organs for transplantation after one's death to save the lives of recipients. It is also a mitzvah for relatives of a deceased person to consent to the donation of the deceased's organs for a lifesaving situation.
Some rabbis require the donor's consent prior to death to permit the transplant, even for a dangerously ill recipient. Other rabbis opine that to save a life, this

requirement of prior consent may be waived. In each instance, however, the family of the deceased should give consent. On the other hand, the family cannot grant permission in circumstances where Jewish law does not allow it. Even if the donor gave consent while still alive, some rabbis rule that the family may object if it is not a matter of saving the life of a recipient. However, if the organ donation is expected to save a life, the family's objection is *halachically* invalid.

All the above-mentioned rules and regulations apply only to a dead donor. It is accepted by all *poskim* that it is prohibited to hasten the death of one person, even by a second, in order to save the life of another person.

Hence, the most crucial and, currently, heatedly debated issue concerning cadaveric organ donation is the determination of the moment of death.

The definition of the moment of death

Death is the irreversible end of life. Biologically, death is a progressive process in which various cells, tissues and organs die at different times, depending on their sensitivity to the absence of oxygen and energy sources.

The socially accepted determination of the exact moment of death depends on the social-philosophical-legal and religious acceptance of specific criteria, even if some cells, organs or parts in the body are still biologically alive.



Several different definitions of the moment of death include the following:

- The death of all body cells, tissues and organs (biological death). Nowadays, this definition of the moment of death is unacceptable anywhere in the world.
- The absolute and irreversible cessation of all cardiac, circulatory and respiratory activities (cardio-pulmonary death).
- The total and irreversible cessation of all brain activities, including the brainstem (brain death), in particular, the absolute and irreversible cessation of respiration.
- Other definitions of death include total and irreversible loss of upper brain function (cerebral death), such as in an anencephalic, or in persistent vegetative state (PVS). This definition is not accepted anywhere in the world.

Hence, according to all acceptable definitions of death currently, there are still various parts of the body that are alive. Therefore, the moment of death is a social/legal/religious determination rather than a scientific/medical one. From a biological point of view, all these definitions of the moment of death are arbitrary.

In previous generations, in the absence of respiratory technological support, there was practically no difference in time between the cessation of cardiac activity and the cessation of respiratory activity, ie, heartbeat and breathing. Both occurred within a few minutes of each other with the inability of doctors to change the outcome.

Recent advances in medical knowledge and technology have created two new realities relating to the definition of the moment of death:

- Ventilators can now artificially prolong respiration for extended periods, thus also prolonging cardiac activity. This technique, therefore, allows wide separation in time between absolute cessation of spontaneous respiration and continues cardiac activity.
- Advances in surgical techniques and increases in medical knowledge permit organ transplantation. The latter necessitated a new definition of the moment of death.

During the 1960s, the term 'brain death' began to be discussed. This term refers to the irreversible cessation of all brain function, including spontaneous respiration, while cardiac function and blood circulation remain intact (Harvard Criteria, 1968). Since then, there has been nearly universal acceptance of the concept of brain death in the western world.

In Jewish law, however, the matter is in dispute among rabbinic authorities. A rather stormy controversy among Orthodox rabbis worldwide is still ongoing. Many national and international conferences have been held to discuss this topic. Many responsa, essays and treatises and several books have been written on brain death in Jewish law.

Brain death, which represents the total and irreversible cessation of brain and respiratory functions, is established by a series of tests, which are very reliable.

Thus, for this determination, one must satisfy the following pre-requisites:

- Identify the cause for the irreversible brain damage.
- Rule out potentially reversible causes, such as severe hypothermia, serious metabolic or hormonal dysfunctions and various drugs and poisonings.
- Perform all the clinical tests at normal body temperature and normal blood pressure.

Brain death requires the following clinical criteria, based on the Harvard criteria:

- Total lack of response to the environment, including painful stimuli (GCS=3).
- Absolute absence of all brainstem reflexes.
- Absolute absence of spontaneous respiration (apnoea).

The Chief Rabbinate of Israel requires the following additional criteria:

- A confirmatory laboratory test, proving no blood flow to the brain (ie, transcranial doppler or TCD; nuclear medicine test or SPECT; and CT-angio).
- Special training of physicians who diagnose brain death.
- A review committee to supervise brain death determinations.

Any person who does not fulfil these criteria, and in particular any patient who is still breathing spontaneously, is alive. Therefore, patients in a persistent vegetative state (PVS), anencephalic new-borns, patients with severe dementia or patients with serious brain diseases or trauma are not defined dead if there is still spontaneous respiration.



According to Jewish law, the moment of death is established even though some body cells, tissues or organs are still alive. The disagreements among the rabbinic decisors relate to the establishment of the organ or function that determines that moment:

- Some rabbis rule that a person is considered *halachically* dead only after the irreversible cessation of both respiration and heartbeat, ie, "cardiac death".
- One rabbi rules that the brain is the organ that determines life and death. Therefore, complete destruction of the brain, including all its cells and components, is the definitive sign of death.
- Other rabbis assert that the *halachic* definition of death is the moment when spontaneous respiration absolutely and irreversibly ceases, even if the heart is still beating. This view opines that the Torah and Talmudic sages define life and death to depend on the function of breathing. However, since respiratory arrest in some circumstances is reversible, *halacha* requires that the cessation of respiration be irreversible and is so determined according to the best medical knowledge of each era. Nowadays, the irreversibility can be established by the absolute cessation of cardiac function or by the absolute cessation of the function of the brainstem.

Some rabbis consider brainstem death to be the equivalent of physiologic decapitation, which is an acceptable *halachic* definition of death. Other rabbis consider brainstem death as the *halachic* definition of death because it establishes the irreversible cessation

of spontaneous respiration. Hence, the *halachic* definition of brain death is defined by the irreversible cessation of respiration, whereby the brain death is required to prove the irreversibility of respiratory cessation.

This approach differs from the medico-legal definition of brain death, which considers the status of the brain itself to determine whether a person is dead or alive.

In a pluralistic society, a universally accepted definition of death can be legislated for society's needs (inheritance, murder, discontinuation of treatment, use of organs for transplantation, etc). However, one must also allow a minority to differ from the norm established by the majority.

Indeed, some people object to the brain death definition for various reasons:

- **Emotional**, such as the feeling that a warm body with a beating heart cannot be defined as a corpse.
- Concern about the **slippery slope**, whereby the definition of death may be expanded to include cerebral death, even if the brainstem is still functioning (ie, spontaneous respiration is still present). These attitudes raise concern of a slippery slope process whereby different and changing definitions of death will develop due to changing social needs.
- **Scientific**, because even if the brainstem is irreversibly damaged, some cells of the brainstem and other parts of the brain may still be functioning; hence, there is no medical proof for 'whole' brain death.
- ***Halachically***, some rabbinic authorities define the moment of death by cardio-respiratory criteria.

My understanding of the *halachic* principles on which the moment of death is determined, based on the opinions of some leading *halachic* authorities, is that the absolute and irreversible cessation of respiration is the correct ***halachic*** definition of the moment of death. This can be reliably established by an apnoea test, clinical Harvard criteria and confirmatory laboratory test. Based on these criteria, the establishment of the moment of death, defined as the absolute and irreversible cessation of spontaneous respiration, is not a change in the fundamental principles of *halacha*.

Based on Torah and Talmud sources, it seems to be clear that respiration is both the sign of the beginning of life and the sign of the end of life. This was true in the past, this remains true in the present and this will stay true in the future. What has changed is the medical technology to establish the absolute and irreversible cessation of respiration. In the past, the cessation of heart function was the proof of the irreversibility of cessation of respiration, whereas currently, the destruction of the respiratory centre in the brainstem is the proof of the irreversibility of cessation of respiration. Hence, there should be no concern of a 'slippery slope' process if one adheres strictly to this *halachic* definition.

Conclusion

All *poskim* agree that obtaining lifesaving organs from dead people is not only permissible but is a recommended act, and it overrides some prohibitions in the process of obtaining the organs because of *pikuach nefesh*. This, however, depends on the definition of the moment of death.

According to the *poskim* who define the moment of death by cardio-respiratory criteria – most lifesaving organs cannot be harvested from the dead, because at this stage they are not viable anymore.

According to the *poskim* who define the moment of death by respiratory-brain death criteria – all lifesaving organs can be procured from the dead.

However, according to the Chief Rabbinate of Israel, the medical criteria of respiratory-brain death include the clinical Harvard criteria plus a confirmatory laboratory test, provided the diagnosing physicians are adequately trained in the diagnosis of respiratory-brain death.

Rabbi Prof Avraham Steinberg, MD, is director of The Medical Ethics Unit and chairman, IRB, at Shaare Zedek Medical Center in Jerusalem, Israel. He was one of the key note speakers at our recent convention.



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Hatzolah Assist, CPR Instructor



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Logistics Assistant, Shabbos Driver, Decontamination



ALON **FITTINGHOFF**
Volunteer Responder



ALON **JOSEPH**
Volunteer Responder, CPR Instructor



ANDI **BENGIS**
CRU



ANDREA **FEINBLUM**
Hatzolah Assist



ARI **KIEVMAN**
CRU



ARIEL **BENDER**
Volunteer Responder



ARIEL **YUTER**
Volunteer Responder



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CRU



ASHER **GOLDBERG**
Volunteer Responder, CPR Instructor



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Volunteer Dispatcher



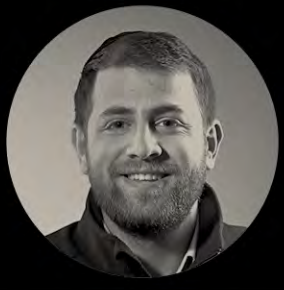
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Volunteer Responder, CPR Instructor



AVIGDOR **HACK**
ALS Responder



AVRAMI **NOSSEL**
Volunteer Responder



AVRIL **JOSEPH**
Fundraising, Hatzolah Assist



BEN **SMOLOWITZ**
Volunteer Responder



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President



CALEV **FREEMAN**
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Fall prevention co-ordinator



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WE'LL CATCH YOU WHEN YOU FALL



Uriel Rosen

Hatzolah's Fall Prevention Programme focuses on proactive wellness for seniors.

Over the years, we've noticed that falls are one of the most frequent concerns among individuals aged 65 and above. This reality prompted us to create a specialised Fall Prevention Programme that not only addresses this issue, but also empowers our seniors to lead safer and more independent lives.

Imagine a world where a stumble doesn't cast a shadow of doubt on your safety. Hatzolah's Fall Prevention Programme is designed to make this a reality, instilling a sense of confidence and vitality among seniors. Understanding that falls can result in both minor injuries or more serious fractures – like the dreaded hip fracture – we're committed to tackling both immediate and long-term concerns.

Our approach to this programme is rooted in proactive wellness. While some falls are accidental, we firmly believe that many can be prevented with the right measures. This is where our focus lies – on avoiding incidents that can be sidestepped with pre-emptive care.

Joining our Fall Prevention Programme marks the first step towards a safer future. When you sign up, a skilled physiotherapist will visit your home at your convenience. This personalised assessment covers various aspects, including cognitive functions, daily activities, mobility, home environment, balance and gait. All these factors contribute to the risk of falls, and our experts employ a thorough formula to determine the most suitable level of assistance.

What makes our programme exceptional is its personalised solutions. Based on your assessment, we'll provide recommendations that cater to your unique needs. Whether it involves working with a biokineticist, participating in physiotherapy sessions or making minor home improvements, our goal is to enhance your living space and provide the physical support needed to prevent avoidable falls.

Our commitment to you doesn't stop at the assessment. After your evaluation, we'll give you a call outlining the suggested interventions. We'll provide you with contact information so you can conveniently schedule the recommended appointments. And rest assured, we'll continue to stand by your side with follow-up calls, tracking your progress and ensuring you are benefiting from the assistance you've received.

Our Fall Prevention Programme's impact is evident in the numbers. Currently, 139 individuals have recognised the significance of taking control of their well-being and have embraced the programme. We've conducted 128 thorough assessments, shaping personalised action plans for each participant.

Our programme is designed to empower you with the necessary tools and guidance to reduce the risk of falls and enhance your overall safety. Remember, while we are dedicated to helping you every step of the way, maintaining your progress and adhering to the recommended guidelines ultimately lies in your capable hands. Your choice to prioritise your health can lead to a more secure and fulfilling lifestyle.



It's never too late to invest in your well-being, and Hatzolah is honoured to guide you on the path to a safer and more confident life.

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We accept referrals from GPs and health professionals as well as the individual themselves and their friends or family members.



THE GIFT OF A SECOND CHANCE

Robyn Shapiro

Kidney donors and recipients share their remarkable stories.

Life2Life is a project of Hatzolah, which aims to raise awareness and educate primarily the South African Jewish community about blood and organ donation. In 2021, the organisation facilitated its first local kidney transplant, which propelled two more kidney donations to take place in 2023. The first was between Maurice Shapiro (donor) and Gary Soicher (recipient) and the second was between Lara Kaplan (donor) and David Shapiro (recipient). These are their miraculous stories.

Lara Kaplan and David Shapiro's story

Lara

My story starts in November 2021. Samantha Shapiro (David's daughter) posted a message on social media that her father had been ill for a long time with kidney disease, and his last
hope was to get a transplant. Unfortunately, none of his family members were a viable match, so they decided to turn to the community. When I saw this, something resonated within me. I thought maybe I could do that, maybe I could donate my kidney, and so the journey began.



After thinking about it for a few days, I discussed it with my husband, who was a constant support throughout. He encouraged me to find out more, so I responded to the message, and Lance, from Life2Life, got in touch with me. Before this I didn't even know that Life2Life existed, but without Lance and the organisation, the transplant couldn't have gone ahead. He helped us through every step of the way – from support to logistics to liaising with the transplant clinic. After many tests and scans to check my kidney function and general health to ensure that I was a good candidate for kidney donation, I was cleared for the procedure.

David

My journey began in 1984 at the age of 20, when I suddenly experienced bad pain on my left side. After a battery of tests, it was established that my left kidney was blocked. Lying in the Joburg Gen, my ward overlooking the zoo, I wondered: "Why? I'm only 20, far too young to have kidney problems." I thought it was Zaidas who wet their beds, not a youngster like me.

The repair of the kidney would require surgery. The left kidney was pretty obstinate, as it refused to remain open over the next few years. In August 1997, my life took a bad turn when the love of my life, my beloved wife Andy, passed away suddenly at age 33, leaving me and my two daughters. Sammy was seven and Gaby was just four years old. Until today, I have never got over her death and I think of her every single day.

I had my own health issues, but I had to be strong for my girls as they depended on me for everything. I pushed on regardless and never let my illness prevent me from always being there for them. Eventually in 2013, it was decided to remove the left kidney as it was not draining at all. It was believed that the right kidney was functioning well. Unfortunately, this was not the case and every visit to my nephrologist showed a deterioration in function.





From 2013 until today, I have been hospitalised 42 times and my daughters and I have estimated that the years before that, when I was suffering from general declining health, there were possibly another 15 admissions.

I needed to get onto dialysis as soon as possible. I know dialysis is a life-sustaining procedure, but for me it was absolute torture. I was on dialysis for seven years. As we couldn't find a donor because no one in my family, including my daughters, were a match, my daughters decided to make a Facebook page: "David needs a kidney". Last year, August 2022, was a turning point for me, and it marked a shift for the worse. I was not getting good clearance on the dialysis machine and my health was declining. I couldn't walk, think, balance and had to make use of a walker wherever I went, even from my bed to my bathroom. I was barely functioning.

And then the most incredible, selfless person – truly, an angel – Lara Kaplan came forward and proved to be a perfect match. The irony was that I was too sick to proceed with the transplant, so it took almost a year until we were ready. This operation hung over Lara's head too, but being the person that she is, small in stature but huge in courage, she hung on waiting to save my life, absolutely determined.

Lara

For some reason, Hashem put this opportunity in my path, and it became something that I wanted to do, something that made sense to me, a chance to save someone's life and to make a difference. The process was relatively drawn out, so I had a lot of time for research and preparation. I was hoping to go ahead with the transplant in 2022, but unfortunately David was too sick. I had to take a step back and accept that it was in Hashem's hands and, to a certain extent, let go. I believed that if it was meant to be, it would happen in the right time.

My family gave me the most amazing support throughout the whole process, and two men in our community who had donated their kidneys, Mark and Maurice (Maurice just a few weeks before me), were incredibly supportive and helpful. There was another element for me as a woman and a mother going through this.



We finally got the go-ahead in February 2023, nearly a year and a half after starting the process. It was a very overwhelming and emotional moment to realise that I could and would actually go ahead with it.

I met David and his daughters for the first time on the morning of Tuesday, 28 March, before the surgery. I knew from the start that I was testing specifically for David, but I didn't know anything else about him. I wanted to finally meet the person who would be receiving my kidney. It was important for me to put a face to the person who had been so unknown but always the focus of the process. It was very emotional, meaningful and special.

When we saw each other again a few weeks later, it was incredible to see him doing well. I stood next to him thinking: "Wow, how strange and amazing that my kidney is working inside his body right now." Four months later, I am feeling good, and my life is back to normal, to the point that I can forget I even went through the process. But I know my kidney is keeping David alive.

David

I am doing so much better since the transplant. I still have a very long road ahead with recovery, as my body needs time to heal. I am a very spiritual person and I talk to Hashem a lot. I think He's tired of hearing my voice, but it did take Him 40 years of kidney failure to finally come through. There are plenty people needing organs, so come forward, save a life, register as an organ donor and always remember Hatzolah when you are in a generous mood for donations. They do unbelievable work behind the scenes.



Maurice Shapiro and Gary Soicher's story

Maurice



Exactly a year ago, I (Maurice's wife) was assigned to write the Life2Life kidney donation article for Hatzolah's annual magazine. A coincidental turn of events, as, unbeknown to anyone involved in the magazine, my husband, Maurice, had recently been matched as a donor for a kidney recipient.

"It says you are a complete match." I lost my breath as I read the result. I was fully aware of what Life2Life does. I had consciously not attended their launch eight years prior, despite being a Hatzolah dispatcher, as I felt being the parents of young children, we were not in a position to donate our kidneys. But after hearing about the local, inaugural Life2Life donation done by Rabbi Mark Friedman in November 2021, Maurice felt a sudden spark of inspiration that this was something he could do. So he contacted Hatzolah chairman and Life2Life founder, Lance Abramson, and went to get tested.

Lance told us, in his always kind and gentle manner, that the decision was ours and that we were not to feel pressured in any way. So we thought about it for a month. It seemed too easy; we tested and suddenly matched. There must be other people who had matched too, and further testing looked time-consuming and laborious for our busy schedules.

As I was lighting my candles one *erev* Shabbat, still indecisive, Maurice came to tell me that he had made a decision that day and had already told Lance. He wasn't going to do it.

"He demonstrated that you don't have to be superhuman to do something miraculous and exemplified to our children true chessed."

Gary



A flash of inspiration or brilliance in the sports arena would be considered a 'game-changer'. What I have experienced over the past six months, post-kidney transplant, has been a 'life-changer'. I was the beneficiary of an altruistic kidney donation by a person of immense courage, namely, Maurice Shapiro. Maurice's deed is the real essence of not only displaying, but performing, the act of *chessed*. Magnanimity in its entirety and, while he has a personal story and journey to reflect on, so too do I have a story to tell.

After a two-and-a-half-year stint on dialysis and being told that the national waiting list to receive a kidney was in excess of 12 years, it was suggested to me to contact Hatzolah and Life2Life. I was introduced to Lance Abramson by Dovber Unterslak, and so the process began. Confidentiality, constant updates, insights and information were forthcoming from day one. Lance showed kindness, empathy and an in-depth knowledge of the entire process, which made understanding it much easier and more manageable. Working up towards the transplant is a long journey and required patience, determination, lots of medical testing and more patience.

Maurice

I was in shock. Maurice closed the front door as he walked out to shul, effectively shutting the door on this opportunistic or precarious situation in which we had found ourselves. Lance had already notified our unknown recipient. He had apparently taken it well and had complete *emunah* in Hashem's ultimate plan. An overriding characteristic of Gary's, as we have now come to know him.

But at the time, I didn't know our recipient. However, we knew that he was a Yid in need of help. We also knew he was male, 57 years old, loved the Kruger National Park and had family overseas that he wanted to go visit, both of which he had been unable to do due to his kidney failure. You see, Lance had asked Gary to write a short profile about himself to create a small connection between the donor and recipient.

Lance is a smart guy. I read that profile while Maurice was at shul. I had also been doing research for my assigned article and had learned that matching is not common, it's a miracle.

When Maurice returned from shul, the husband and wife 'debate' began, and on Monday morning, Maurice informed Lance that the decision had been overturned. And I couldn't have been prouder.

We stepped into the unknown together. To say that we were scared was an understatement. But Maurice forged ahead, determined to advocate for his unknown recipient. He rescheduled his diary to accommodate the multitude of pricking and prodding procedures, often setting up his workstation at the Donald Gordon Transplant Centre, and forwent his December holiday that year. He demonstrated that you don't have to be superhuman to do something miraculous and exemplified to our children true *chessed*.

Almost a year later, after a few medical and paperwork delays, and with Lance's support and Mark Friedman's guidance – together with the incredible doctors at the Donald Gordon Transplant Unit – the transplant took place on 7 February 2023. Six weeks later, once both Maurice and Gary were well, they met at Hatzolah House for the first time in a very emotional union: two men forever united by a shared kidney.

Gary

Almost six months have passed since the surgery took place. Unwavering support and encouragement from family and friends, both pre- and post-surgery, was unbelievable and humbling. The transformation has been incredible and life changing. No more dialysis. So much more time on my hands. No more waking up and thinking, 'what is today going to bring?' No uncertainty with regard to running a business. But I have always believed that in life, every challenge that you are given can be overcome.



The act of giving to a fellow Jew displays incredible *chessed* and *pikuach nefesh* – if you save a life, you save a nation. Hatzolah is the epitome of this. Signing up to become a donor with Life2Life is a way to give back to our wonderful Jewish community and to those who are less fortunate than us in times of health needs or crises.

I continue to be well, following doctor's orders, and the improvement in my well-being and day-to-day living is immeasurable. I have been given a new lease on life. The true heroes in the world are not the famous sports stars, musicians, writers and actors, who we often aspire to emulate, but the people on the ground, who we relate to, each and every day.

My profound thanks go to Lance Abramson and our entire Hatzolah team. To all the donors, like Maurice, incredible human beings whose ability to see the greater good – I give my sincere gratitude. May you all be blessed with continued good health and go from strength to strength. Thank you for giving me the gift of life.



For further information, contact Hatzolah or Life2Life at info@life2life.co.za.

Life2Life
The Donor Network

SAFE SPACES FOR OUR TEENS

Sheri Hanson

WHAT IS HATZOLAH CONNECT?

Hatzolah Connect is an anonymous, non-judgmental space for youth. Through our hotline, teens can access personal support, resources and hope from highly trained counsellors who are supervised by mental health professionals. The line is open 24 hours a day, seven days a week. The teenage years can be a tumultuous period of growth, self-discovery and challenges. As adolescents navigate the complexities of adolescence, they often encounter an array of emotional, psychological and social issues. Hatzolah Connect is there to provide much-needed support and assistance.

HATZOLAH CONNECT BEGINNINGS

Hatzolah Connect began during the Covid-19 pandemic, when we saw the absence of resources for teens, a group who had lost out on so much. After careful research, we found a safe online app that could be used anonymously and without cost to the user. To date, our counsellors have attended to over 550 calls.

WHO WE SERVE

Eighty-five percent of our callers range between the ages of 13 and 25, with some callers being adults.

PROVIDING A SAFE AND ANONYMOUS SPACE

One of the most critical aspects of a teen helpline is that it offers a safe and confidential environment for young individuals to express their concerns without fear of judgment or repercussions. Adolescents often feel reluctant to confide in their parents, teachers or friends because they fear being misunderstood or stigmatised. The helpline acts as a bridge, allowing them to speak openly about issues such as depression, anxiety, bullying, substance abuse or family problems while remaining anonymous. This anonymity grants them the freedom to share their thoughts and emotions honestly, facilitating the process of seeking help and guidance.

ACCESSIBLE SUPPORT 24/7

Life doesn't follow a schedule, and crises can strike at any moment. Hatzolah Connect ensures that support is readily available round-the-clock. Whether it's the middle of the night or a holiday, knowing that a caring voice is just a phone call away can make a world of difference to an overwhelmed teen.

EMPOWERING TEENS WITH INFORMATION

Hatzolah Connect provides teens with mental health resources and guidance on a wide range of issues, equipping young callers with the knowledge and tools to make informed decisions. By empowering teenagers with essential information, the helpline fosters emotional intelligence and resilience, ensuring they are better equipped to face the challenges that come their way.

PREVENTION AND EARLY INTERVENTION

Early intervention is key to addressing various problems faced by teenagers. Hatzolah Connect acts as a frontline defence, spotting potential issues before they escalate into full-blown crises. Our counsellors are trained to recognise signs of distress and provide timely support and referrals to appropriate professional services.

SUICIDE PREVENTION

Tragically, suicide is a leading cause of death among teenagers. Hatzolah Connect can be a lifeline for those experiencing suicidal thoughts or feelings of hopelessness. Counsellors are trained to handle these critical situations with empathy and expertise, offering hope and support where it matters the most, and contributing significantly to suicide prevention efforts.

BUILDING A SUPPORTIVE COMMUNITY

A teen helpline doesn't solely benefit individual callers, it also creates a sense of community among young individuals facing similar challenges. The helpline fosters empathy, compassion and a sense of belonging, allowing teenagers to understand that they are not alone in their struggles. This support network can be instrumental in building resilience and promoting mental well-being, ultimately contributing to the overall well-being of the community.

By providing a safe space, accessible support and valuable information, Hatzolah Connect empowers teens to face life's challenges with strength and courage.

"The helpline acts as a bridge, allowing them to speak openly about issues such as depression, anxiety, bullying, substance abuse or family problems while remaining anonymous."

WHO ARE OUR COUNSELLORS?

Our counsellors are a carefully selected group of young adults who undergo rigorous self-awareness and basic counselling skills training. They also receive ongoing training throughout the year. Supervision from professional social workers and psychologists is available for every call.

WHAT OUR COUNSELLORS HAVE TO SAY...

"I am privileged to be a part of the team of Hatzolah Connect counsellors. The thorough training I have received empowers me to handle the calls that come my way and the supervisors are always there to assist and direct us. At Hatzolah Connect, we treat each call seriously and give each caller time to express themselves and their challenges. Almost all our callers end off feeling calmer and more empowered to handle whatever their challenges are. Our scope may be limited, but without a doubt, our impact is far-reaching!"

"The feeling you get when you see a caller starting to feel more comfortable with the counsellor, or when they say they are feeling better, is truly rewarding. This platform is so much more powerful than we can even comprehend, and I am truly grateful to be a part of something so impactful."





No matter who you are, where you are from, who you love or where you pray, we all need to belong.

Chat to our Hatzolah Connect counsellors on our secure and anonymous chat line. Whether it's trouble with school, at home or feeling down and lonely let us help you sort things out.

You are not alone

Follow us on

@hatzolah_connect

https://bit.ly/HatzolahConnectChat

Talk to 44918

www.hatzolah.co.za

HATZOLAH
CARING FOR LIFE

HATZOLAH CRISISRESPONSE UNIT

HATZOLAH Cares!

It takes **a village**



Sheri Hanson

Hatzolah's Postnatal Wellness Programme is a lifeline for new moms and their families.

Welcoming a new life into the world is undoubtedly one of the most joyous and transformative experiences in a parent's life. However, the period after childbirth, known as the postnatal phase, can also be incredibly challenging for new mothers.

Our postnatal programme was developed to provide support and ensure the well-being of the mother, father and child. In this programme, anyone who is either pregnant or has had a child in the past 12 months can sign up.

On joining the programme, moms receive a beautiful baby bag full of gifts and information for both mom and baby. Once the baby is born, they receive a weekly nurse visit from a registered nurse as well as continuous monitoring and support from dedicated callers. These callers have been trained to pick up on early signs of possible post-partum anxiety and depression and will make a referral for further intervention when necessary.

The power of the village

The age-old idiom: "It takes a village to raise a child" beautifully encapsulates the essence of this programme that aims to prevent postnatal issues. The Postnatal Wellness Programme recognises that the collective efforts of a supportive community are essential in nurturing the healthy development of a child. By providing a network of callers and nurses, we are able to foster a sense of interconnectedness and shared responsibility at a time that can feel very lonely for new parents.

Emotional support and empowerment

Motherhood can be an emotionally overwhelming journey, particularly for first-time moms. The Postnatal Wellness Programme offers a lifeline of emotional support, helping new mothers navigate the challenges they may face. Having a non-judgmental and supportive voice at the end of the phone allows mothers to freely voice their concerns, share their ups and downs and receive valuable guidance. It also allows for early detection of more serious emotional challenges, enabling the person facing these challenges to benefit from early intervention and referral to the appropriate professional service. Empowering new parents not only enhances their parenting skills but also boosts their self-confidence which, in turn, creates a nurturing environment in which the baby can thrive.

Ensuring optimal health

The health and well-being of both the mother and child are key to the success of this Postnatal Wellness Programme. Regular nurse visits allow for the early detection of any issues that may need further attention. The nurse can also assist with feeding issues as well as mom's nutrition. Referrals to physiotherapists, psychiatrists, psychologists, nutritionists and lactation specialists are made where necessary.

Attachment and early intervention

Children's attachment to their primary caregivers is essential for their cognitive, emotional and physical development. Postpartum anxiety and depression can interfere negatively on the attachment between mom and baby and therefore early detection and intervention is crucial.

Reduced maternal stress

Motherhood can be a stressful experience, especially when coupled with sleep deprivation and feelings of isolation. The Postnatal Wellness Programme can help alleviate this burden by offering ongoing support. Reduced stress levels contribute to better maternal mental health, fostering a positive atmosphere for the child's emotional development.

Personal experience

By providing nurse visits as well as daily callers, new mothers are empowered to face the challenges of motherhood with confidence. Here is what one of our moms had to say:

"The Hatzolah Postnatal Wellness Programme has made a huge impact in my life. Being a first-time mom is very hard and having someone to talk to every day, someone to check up on you, someone to answer your questions, someone to cry to, laugh with and build a relationship with has made it so much easier and more manageable having a baby. We are so blessed to have this organisation, which looks out for everyone."

What's in the **blue box?**

Have you noticed these blue boxes at your shul or school?

Have you caught sight of those unassuming blue boxes that dot the landscape of your local shul or school? Have you wondered about their purpose and contents? Let's uncover the facts.

Doron Sussman, full-time responder at Hatzolah SA, says the blue boxes have been placed in community establishments, strategically positioned to ensure accessibility within a 150-metre radius – a safety net, just in case a community member collapses.

Sussman lays out the rationale behind this initiative: "If, G-d forbid, someone were to collapse, the time to collect the equipment is dramatically reduced. We aim to reduce the time to defibrillation."

The objective is simple – reducing the time it takes to initiate defibrillation during CPR as a result of adult cardiac arrest. These tools serve as aids, bridging the gap between collapse and life saving intervention. For community members, these blue boxes can mean the difference between life and death, cutting down the time it takes to administer that crucial initial shock. And for those with medical expertise, they offer a well-equipped resource, ready for action if CPR becomes necessary.



How do I unlock the blue box?

While the box is permanently sealed, it is easy to open. However, it's essential to let the onsite manager know when it has been used, so he can inform Hatzolah to refill and check the box.

Do you know where the closest box is in your school or shul? Let your kids help you find them. Turn to page 70 for more information.



1. Oxygen cylinder with mask.
2. AED (Automated External Defibrillator) – a portable electronic device that attaches to the chest and operates automatically to measure the heart's rhythm to determine if an electric shock is needed. Designed to be used by lay rescuers and professionals.
3. BVM (Bag-Valve-Mask) – a handheld tool that is used to deliver positive pressure ventilation to any subject with insufficient or ineffective breaths.
4. Gloves

What's in the **Stop The Bleed kit?**



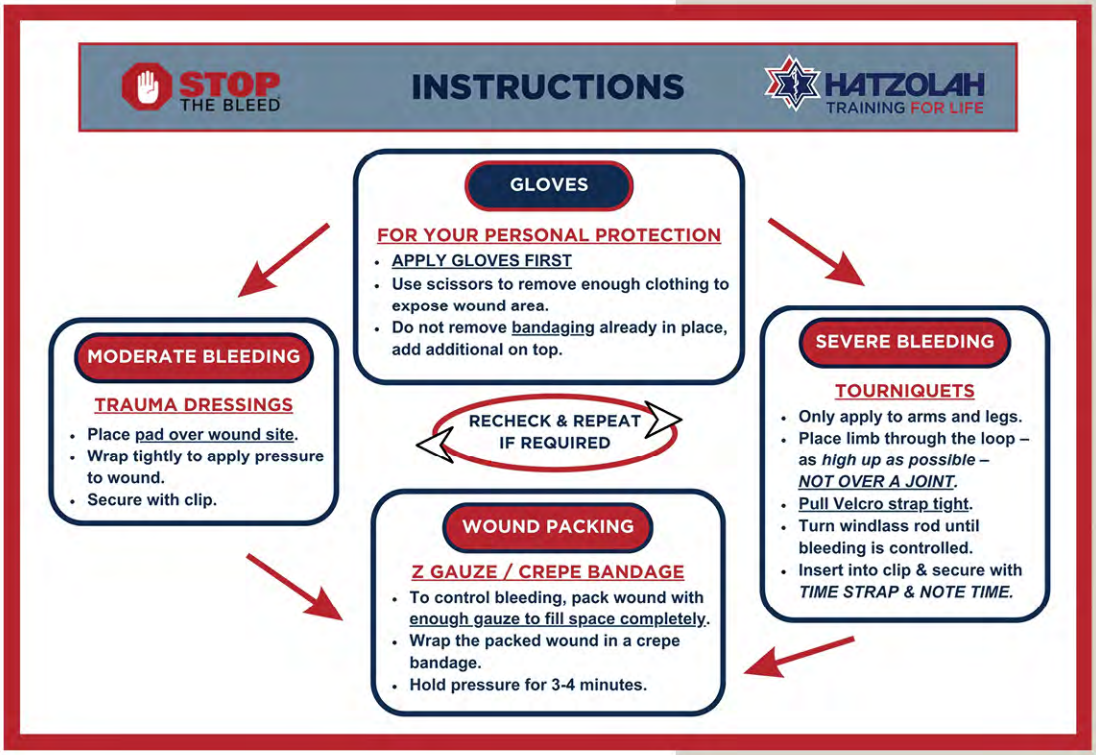
Next to the blue box, you will find another invaluable aid for an emergency. This is called a Stop The Bleed kit.

Bernard Segal, full-time responder and manager of the Stop The Bleed project, explains that this programme was created in response to the school shootings in America. There, it became essential to have necessary equipment to be able to stop deadly bleeds on site as time is critical.





1. Multiple tourniquets – used to slow/stop traumatic bleeding
2. Rescue scissors
3. Gloves
4. Israeli Trauma Dressings – specially designed bandages to stop haemorrhagic bleeding due to trauma.
5. Bandages and gauze



HATZOLAH'S **CAPE INVASION TOUR OF 2023**



Alan Da Costa

Blending breath-taking landscapes with the thrill of the open road and the guiding light of the 'Hatzolah factor'.

In a world that has seen its share of challenges, the spirit of unity and resilience remains unwavering. This year, Hatzolah's Cape Invasion Tour of 2023 brought together a diverse group of individuals who sought to reclaim a slice of freedom and camaraderie that had been temporarily suspended. Against the backdrop of the scenic Overberg region, this five-day adventure became a testament to the indomitable spirit of Hatzolah and its remarkable community.

Invading the roads

While we may not typically see ourselves as invaders, this year's Hatzolah Invasion Tour redefined the concept. For five extraordinary days, we took to the roads of the Southern Cape Region, embarking on an exhilarating journey that blended breath-taking landscapes with the thrill of the open road. As participants of the tour, we became part of a unique invasion, determined to make the most of our time together.

Embracing the challenge

Stepping into the Hatzolah Invasion Tour as a first-time participant was a mix of anticipation and excitement. Amid the backdrop of a world dealing with the challenges of Covid-19, we found ourselves in a new reality, where masks and precautions were no longer part of our daily routine. The prospect of cycling 500km and conquering over 5 000m of elevation added another layer of anticipation. But one thing I hadn't accounted for was the unwavering "Hatzolah factor" that would come to define this experience. In the spirit of Pirkei Avot's timeless wisdom: "Who is wise? One who learns from every person." I soon discovered that the journey itself held invaluable lessons, and the "Hatzolah factor" was our guiding light.

The Hatzolah factor

Hatzolah, an organisation committed to safeguarding our community and forging a brighter future together, was the driving force behind every aspect of the tour. Beyond the cycling, the safety of the participants took centre stage, mirroring the dedication that Hatzolah had shown throughout the pandemic. The team, led by the dynamic trio of Mark Kruger, Sharon Newfield and Yudi Singer, supported by the likes of Bernard Segal, Warren Katz, Albert Ndlovu and Sisqo Buthelezi, ensured our well-being at every turn. A special mention goes to Bernard Segal, who provided an "ambulance" of encouragement in the form of ice-cold Cokes when the going got tough. He also confiscated my mobile phone so I was not distracted by the outside world. This exemplified Pirkei Avot's principle of: "Make for yourself a mentor; acquire for yourself a friend." Their unwavering support and camaraderie elevated the experience, reminding us that unity is our greatest strength.

Exceptional support

The Cape Invasion Tour was more than just a cycling event; it was a symphony of support and camaraderie. The marshals, like orchestrators guiding us through traffic, ensured our safety on the road. Our bike mechanic, Sylvester, kept our trusty steeds in impeccable condition, a crucial role for a group with a shared affinity for cycling. Amid the challenges, the Hatzolah Tour became a true representation of unity, exemplifying the best of our community. The collective effort was a true embodiment of "all Israel are responsible for one another", a principle deeply rooted in Pirkei Avot's teachings.









A journey of discovery

The landscapes we encountered during the tour were nothing short of awe-inspiring. From the exhilarating climb up the Outeniqua Pass, to the Seven Passes en route to the Wilderness and the beautiful landscape outside Mossel Bay on the way towards Cape Town, our exploration revealed the splendour of our beloved country. This added layers to our journey, inviting us to connect with the magnificence of our land while reflecting on Pirkei Avot's wisdom: "Look not at the vessel, but at what it contains."

Nourishing body and soul

Our invasions were not just limited to conquering the roads; we also embraced the delectable offerings of the region. The Press in Cape Town ensured our culinary experience was nothing short of exceptional. This transformed mealtimes into a feast for the senses, a reminder of Pirkei Avot's lesson: "Eat bread with salt, drink water in measure, sleep upon the ground, and live a life of hardship; but engage in Torah." The absence of complaints spoke volumes, underscoring the exceptional quality of the fare.

New friends/old friends

I certainly met up with some old friends going back to school days and time in the army. I also met up with new friends who I certainly believe I can call friends. On a note of sadness, as I write this article, I reflect on the instant friendship I struck up with Alan Bamberger, who I kept in touch with over the year. It is truly devastating to have heard of his untimely passing and, in the short while I got to know him, he truly stood out as the epitome of a *mensch*. He will be sadly missed.

A return to normalcy

The Hatzolah Cape Tour of 2023 went beyond cycling; it symbolised a yearning for normalcy and a celebration of our collective spirit. Let out from the cages of Covid, which by now had recessed into a sense of normality, the tour created an environment that allowed us to savour moments of freedom in the company of kindred spirits. As we pedalled through the breath-taking landscapes, we rekindled the joy that comes from shared experience. We reclaimed a sense of normalcy, a tribute to Pirkei Avot's guidance: "Who is strong? One who overpowers his inclinations." In our carefulness, we found carefree moments of joy, rekindling our spirits and savouring the bonds that define us.

The Hatzolah Cape Invasion Tour was more than a cycling adventure; it was a manifestation of our community's resilience, unity and spirit. We are again reminded of Pirkei Avot's wisdom: "Do not separate yourself from the community." Our shared experiences and unwavering support echo through time, serving as a reminder that together, we can overcome any challenge. With the wind at our backs, we eagerly anticipate the next chapter of this extraordinary adventure, knowing that our unity and wisdom will guide us forward.

Hatzolah is a truly remarkable organisation.

36ONE Asset Management | HATZOLAH CycleTOUR

DANI'S REVIEW

MOVIE NIGHT



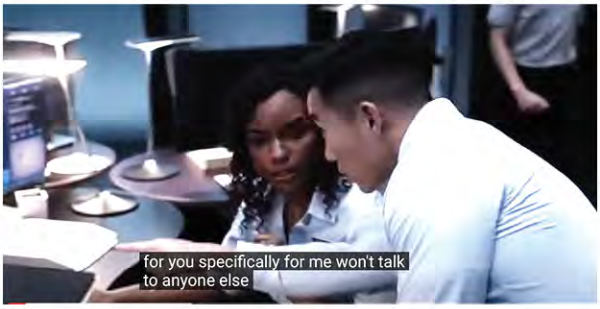
Hatzolah dispatcher Dani Abramson reviews a 911 call during the popular fictional show, '911 Lonestar'.

Picture it, a scene from the series '911 Lonestar' – and the call comes in.

The scene starts with the camera panning from one dispatch controller to another, who are all seated in a big control room. Although this is the case for many control rooms, Hatzolah South Africa has a distributed model underpinned by advanced and easy-to-use technology that keeps our dispatchers mobile. We can answer the emergency call from anywhere and are able to efficiently send an ambulance within seconds. Hatzolah does have multiple dispatchers who are on shift at the same time, but we are not placed in the same room 24/7. Should more than one person call at exactly the same time, multiple dispatchers' phones will ring, and they will drop everything to answer the call.

The technology enabling this is an advanced telephone solution that allows calls to be switched seamlessly between mobile telephones, and a custom built Android application on a tablet device that enables the necessary data to be captured, the call to be dispatched and the data transferred to the ambulance team on the way to the emergency.

Back to the 911 scene: someone comes to Grace and tells her there is a call for her on line 9. It turns out to be someone she knows who has a severe bleeding injury on their leg as they fell through a glass table. Grace calmly talks the patient through controlling the bleeding.





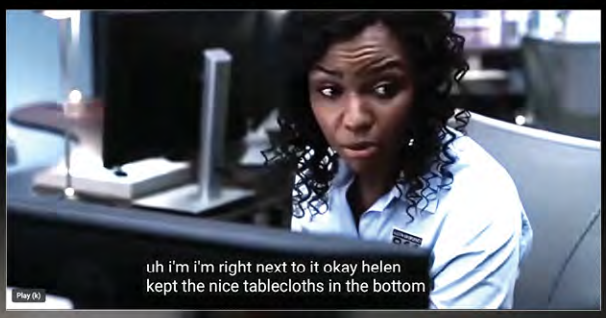
In the scene, Grace is not seen sending an ambulance. This is unrealistic; the dispatcher taking the emergency call will dispatch the ambulance while they are talking to the patient or family.

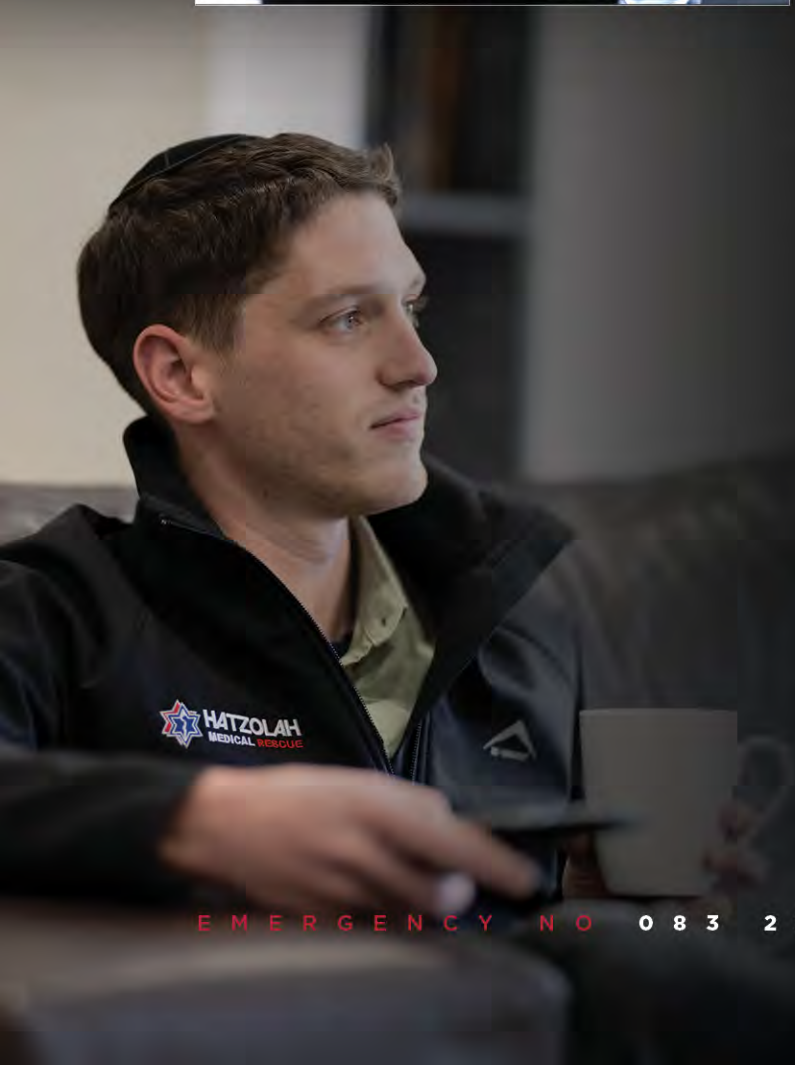
At Hatzolah, the dispatcher will go over our radio system and dispatch the ambulance, as well as

automatically send an SMS to all responders, in case someone doesn't have their radio on and is near to the emergency and able to assist.

Grace has the elderly patient control the bleeding using a tablecloth and a candlestick to form a makeshift torniquet around their thigh. This is unrealistic. Callers are never this calm with this sort of injury; it is usually very difficult to get the required information from a caller with a severe injury, never mind have them apply a makeshift torniquet over the phone.







In the scene, Grace also doesn't ask him for much information. This does not happen in real life. In any EMS environment, the dispatcher will ask multiple questions about the address of the emergency, contact details on scene in case the dispatcher needs to call back (see below regarding access) and the nature of the emergency. This is to ensure the correct resources are dispatched to the emergency. Another thing to note is that Grace is familiar with the house and the objects around the house and uses them to construct the makeshift torniquet – this is also an unrealistic scenario.

Real-world dispatchers are trained with the primary goal of getting the correct resources to the scene, after which the dispatcher will try and provide advice over the phone. The first step would be to send the ambulance and advanced life support and only then advise how to control the bleeding or start telephonic CPR.



In the final scene, you can hear a knock on the door and paramedics just walk into the house. In South Africa, it's a whole lot more difficult to gain access. We need to find out if anyone at home can open all security gates and the door to let the paramedics in. Vicious dogs often need to be locked away and the bell may not even work during load-shedding!



Although this is a great TV show, there are a lot of scenes that aren't accurate. Please remember when calling Hatzolah that the dispatcher may ask you a lot of questions to try and ascertain what is going on in order to send the correct resources. Please bear with the dispatcher so we can send the correct resources to your emergency.

HUGO'S HEROES

FILL YOUR FIRST AID KIT



We asked our school-going Heroes what products are essential for a home first aid kit.

A group of learners, together with Hatzolah, initiated the student-based empowerment programme called "Hugo's Heroes". The idea was to create a first aid team in each Jewish day school to respond to emergencies in the school as and when they happen, while waiting for Hatzolah to arrive. This was named in memory of the late Hugo Paluch, who passed away tragically.

The training encompasses:

- CPR and choking emergencies
- Heart attack
- Stroke
- Environmental emergencies
- Uncontrolled bleeding emergencies
- Bandaging and splinting
- Allergic reactions
- Diabetic-related emergencies
- Burns
- Head injuries
- Chest injuries
- Triage

Students are equipped with the basic necessities to respond to these emergencies and are constantly monitored and trained to ensure the highest levels of professionalism and expertise.

In addition to emergency response, 'Hugo's Heroes' also incorporates health and safety awareness. The training is overseen by Dov Paluch, father of the late Hugo. The concept behind this is "prevention is better than cure". Our aim is to add more eyes – alert, aware and looking for potential danger – in order to prevent any injury and/or fatalities.

This has been a very exciting and rewarding project. It has been incredible to see the determination of the learners to be involved and get as much out of the course and training as possible.

We asked some Heroes what they feel is essential to include in a home first aid kit: These are their answers:

Gavi Levin, Grade 11
Yeshiva College
Burnshield, or Taylor Swift's 'Folklore' on vinyl: "Burnshield is a wonderful tool to include in every home first aid kit as burns are a surprisingly common injury – Burnshield functions to cool, soothe and rehydrate the burn. This is significant in reducing the damage caused... And Miss Swift's 'Folklore' is lowkey lifesaving."

Eva Trope, Grade 12
Yeshiva College
Tweezers: "You would be surprised how often staples need to be removed."

Racheli Vegoda, Grade 10
Yeshiva Maharsha Girls High School
A mouthpiece: "It's a very important part of CPR and allows you to do CPR properly, safely and on anyone."

Ora Chana Jankelowitz, Grade 10
Hirsh Lyons Girls High School
Burnshield: "Because a kid's hobby is to touch a hot stove."

Yehoshua Gerson, Grade 11
Yeshiva Maharsha Boys High School
Bandages: "Bandages have a variety of uses. They can be used to cover wounds, hold splints; if need be, you can turn them into a tourniquet and much more."

Ella Salkinder, Grade 11
Yeshiva College
Chocolate: "It solves all the problems!"

Rivky Kaplan, Grade 10
Yeshiva Maharsha Girls High School
Burnshield: "Quite often in homes, people tend to get burnt. I think that having something to cool the burns is very important and handy to have in every household."

Saphira Feldman, Grade 10
Yeshiva College
Plasters/bandages: "Kids will usually fall or get cuts or scrapes, and adults may also cut themselves."

Esti Reuben
Splints: To help with pain by limiting movement of a limb.

Chaya Jasven, Grade 11
Yeshiva College
Bandages: "Bandages can be used for many purposes, including protecting wounds against infection, controlling bleeding, promoting healing and providing valuable support."

Tova Furman, Grade 10
Beis Yaakov
Bandages: "It's got to be bandages, dressing for wounds and gauze to cover wounds. If you are often around little kids who are often hurting themselves on little things, these are the essentials to have, as any small wound could get infected and it's much safer to cover the wounds!"

Dina Goldberg, Grade 10
Beis Yaacov
Tourniquet/pressure bandage: "A major bleed is a potentially life-threatening emergency and needs to be stopped immediately. There are many other types of emergencies in a home, but they may not all be immediately life-threatening."

Ella Mandelberg, Grade 11
Yeshiva College
"A phone with Hatzolah on speed dial (and Dettol with plasters, just in case)."

Ruth Levy, Grade 10
Yeshiva College
Plasters and Deep Heat: "Plasters with cute patterns and pictures and some TLC can go a long way! Deep Heat is also an essential for any sports-related injuries and immediately calms a patient down."

Ayala Sifris, Grade 10
Yeshiva College
Elastotape: "Plasters would probably be the smartest idea to have in a home first aid kit yet definitely not speaking from personal experience; the sprained ankles, bruised/sprained fingers and wrists happen more often than one may think and, in that regard, Elastotape will be your saving grace. And if you have a dramatic patient, just draw a little flower and it does the same trick as a Disney plaster."



Tzipora Klein – Grade 10
Hirsch Lyons Girls High School
Credit card: "Nothing gets a bee sting or splinter out like a credit card. This will definitely come into use!"

Leah Sifris, Grade 11
Hirsch Lyons Girls High School
The ability to do CPR: "Knowing how to do CPR is essential as it enables individuals to respond quickly and effectively during life-and-death situations. Performing CPR can sustain blood circulation and oxygen supply, potentially saving a life before professional help arrives."

Shira Noik, Grade 10
Yeshiva Maharsha Girls High School
Gloves: "I think gloves are important for helping something as little as a papercut or, in the extreme... a deadly bleed. You are still worried of diseases being transferred between you and the patient through blood and you have to always make sure your scene is safe for yourself before you can help others."

Yael Pinski, Grade 10
Beis Yaakov
Band-aid and antiseptic: "I think a band-aid is the most essential thing in a first aid kit since the highest possibility of something happening in a home setting are incidents such as lacerations, incisions, abrasions, punctures, contusions and evulsions which, in most cases, all involve bleeding. The chances are high that a band-aid will come in handy at some point. Antiseptic slows or stops the growth of micro-organisms on external surfaces of the body and helps to prevent infection. Infections can lead to complications that are serious and life-threatening, which can be easily prevented by the use of antiseptic."

Aaron Leib Reuben
Tape and Space Blanket: 3-way dressing, warmth and one never knows when we need tape.



Ella Rachel Trope, Grade 10
Yeshiva College
Burnshield: "In a home setting, there are so many different ways for someone to burn themselves, like in a kitchen, and it's so important to treat the burns before they get infected.

At the online Hatzolah shop, you are able to purchase a full home first aid kit. Visit https://www.hatzolah.co.za/shop to find out more.

OUR BEATS THIS YEAR

2 546
Emergencies dispatched

11 977
Calls received on the emergency line

139
Fall prevention sign-ups

101
Hatzolah Assist calls Since February

550
Connect line calls

69
Packs for moms received

30
Moms on programme

27
Crisis Response Unit (CRU) callouts

38
Students trained

913
Gemach loans

284
CPR courses

1 334
Participants

4
Blood drives

881
Blood donations

3
Future@Hatzolah students



Right now someone near you needs blood – and not just any blood, the perfect match. Currently, there is a national shortage of blood stock, meaning that hospitals are not receiving the amount of blood that they need. In collaboration with SANBS and Life2Life, **Hatzolah will be running a blood drive to help alleviate this shortage.**

WHO CAN DONATE?

- **16 years or older.**
- **Committed and new donors.**
- **Weigh more than 50kg.**
- **Healthy lifestyle.**
- **Remember to eat a meal or snack before** you come and donate blood.

Look out for our blood donation days, booking is essential:

www.hatzolahbookings.co.za

HATZOLAH Cares!

SANBS
South African National Blood Service

Life2Life
The Donor Network



small PULSES

FUN FOR THE **MINI MEDICS**

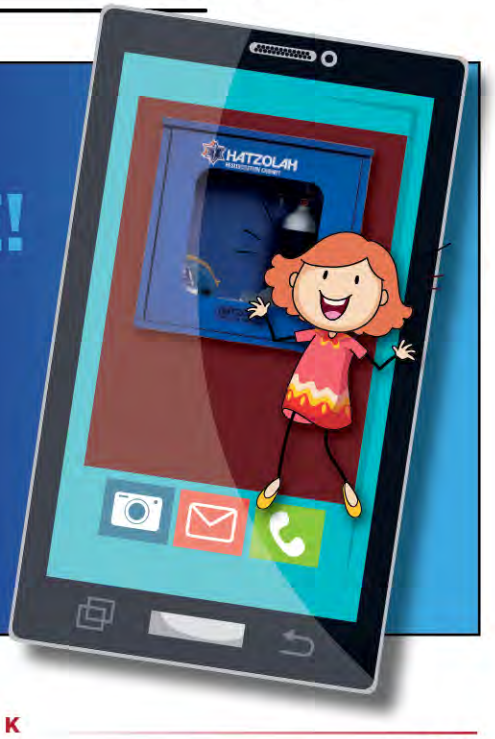
JOIN THE DOTS & COLOUR



TAKE UP THE CHALLENGE!

FIND YOUR NEAREST **AED BOX** AT YOUR SCHOOL AND SHUL.
TAKE A PICTURE WITH THE AED, SEND IT TO US AND YOU CAN WIN A GREAT PRIZE!

EMAIL: **competition@hatzolah.co.za**



EVERYTHING YOU WANT TO **KNOW ABOUT HATZOLAH**



1. How many ambulances does Hatzolah have?
2. What does ALS stand for?
3. What does BLS stand for?
4. What does a dispatcher do?
5. How many volunteers work for Hatzolah?
6. Can you call Hatzolah for an emergency 24 hours a day?
7. What is Hatzolah's number?
8. Why do ambulances have flashing lights?
9. Who rides in an ambulance to help sick or injured people?
10. What is CPR, and when might paramedics use it?
11. What do you call the stretcher that patients lie on inside an ambulance?
12. What does EMS stand for?
13. What should you do if you hear an ambulance siren while you're driving?
14. What colours are on the Hatzolah ambulances?
15. What do paramedics wear to keep themselves safe?
16. How do paramedics communicate with the dispatcher while they're driving in the ambulance?

ANSWERS

1. 5
2. Advanced life support
3. Basic life support
4. Answers the emergency calls and sends the ambulances to the scene.
5. 108
6. Yes! Hatzolah has a team working 24 hours, day and night, even on weekends and holidays.
7. 083 222 1818
8. To alert drivers and pedestrians to the presence of the emergency vehicle, and prompt them to give the ambulance the right of way.
9. Paramedics
10. Cardiopulmonary resuscitation. It is an emergency procedure that can help save a person's life if their breathing or heart stops.
11. Gurney
12. Emergency medical services
13. Slow down and carefully allow the ambulance to pass you.
14. Red, blue and white
15. Uniforms, masks, boots
16. They use a radio to communicate while they are driving.

CUT OUT AND FILL IN YOUR **HATZOLAH HELPER CARD**

Keep it in your school bag or pencil box



HATZOLAH HELPER

STICK YOUR PICTURE HERE

NAME:

ADDRESS:

CLOSEST CORNER:

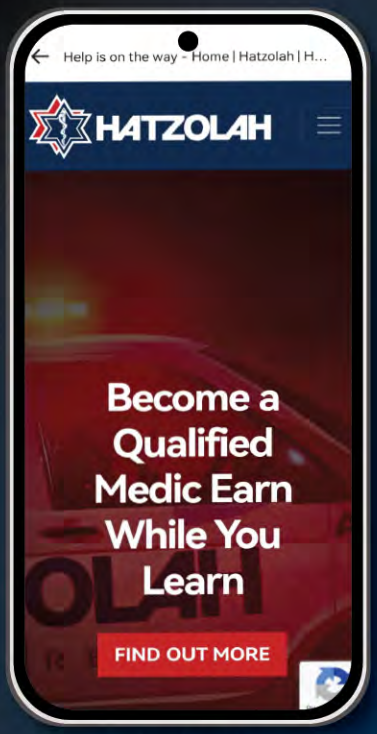
SUBURB:

MOM/DAD/ EMERGENCY CONTACT NO:

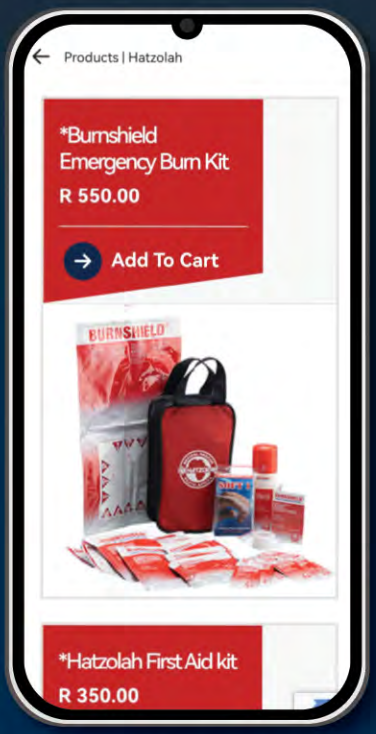
HATZOLAH EMERGENCY NO: 083 222 1818

Created by Kira Jacobs, a dispatcher of six years and a nursery school teacher at King David Linksfield

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Hatzolah Medical Rescue JHB

@hatzolahsa

WE ARE JUST A CLICK AWAY

Keep up to date with behind-the-scenes,
helpful lifesaving tips and day-to-day happenings

HATZOLAH

29 Durham Street, Raedene. **Tel (Office):** 0860 100 101 **Email:** info@hatzolah.co.za

Hatzolah Medical Rescue | Treatment Excellence | Unsurpassed Response Times

Investec

OUT OF THE ORDINARY

Demand *extra ordinary.*



Our clients push themselves to new heights, constantly seeking to expand, grow and innovate. They are driven by a desire to be the best, to make an impact, to never settle for ordinary. Investec is a leading international bank and wealth manager.

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IN YOUR DARKEST HOUR WE SHINE THE LIGHT



DONATE IN 2 SECONDS WITH ONE TAP

TO HELP SAVE A LIFE

USE OUR NEW ELECTRONIC TZEDAKAH BOXES AT SELECTED KOSHER OUTLETS

HATZOLAH MEDICAL RESCUE

TAP TO DONATE OR GO ONLINE OR SEND AN E-CARD WWW.HATZOLAH.CO.ZA

EMERGENCY NO 083 222 1818