BRACING FOR IMPACT

Public safety telecommunicators confront life and death during any given shift, p.12

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Bracing for Impact
Public safety telecommunicators confront life and death during any given shift.
By Maggie Eastman

Crisis Response
Crisis intervention team programs are geared toward defusing encounters between law enforcement and people suffering a mental health crisis.
By Cynthia Fell and Patrice Coleman

The First Responders Front
How Ukraine’s first responders and their infrastructure cope with war.
By Jeff Winbourne

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About the Cover: At any moment, the public safety telecommunicator may face tragedy or trauma at the other end of the telephone line. Read a series of vignettes from one veteran telecommunicator.
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The Editorial Committee’s purpose is twofold: 1) It helps ensure that the magazine’s content mirrors the interests of APCO’s diverse membership; and 2) it provides the magazine staff with expert resources and writers who can share with APCO’s members the knowledge and experience necessary to effectively staff, operate, equip and maintain public safety communications centers.
Leading by Example

Since 1994, the second week of April has been recognized as National Public Safety Telecommunicators Week. ECCs around the country celebrate in their own unique way, often relaxing dress codes, encouraging friendly competitions and recognizing the hard work these mostly unseen heroes do 24/7/365. For that one week, managers and directors make a special effort to create an atmosphere of fun and appreciation. But what about the other 51 weeks a year? Have we become complacent, satisfied with annual acknowledgment for the lifesaving work our telecommunicators do, rather than creating a culture of excellence that continuously recognizes their value?

The importance of culture to organizational success has taken on greater prominence since the pandemic and subsequent staffing crisis. However, culture has always been a significant factor in employee satisfaction. The difference is the type of expectations employees have of their employers.

Currently four generations share the workplace: baby boomers (born approximately 1946-1964), Generation Xers (1965-1976), millennials (1977-1995) and Generation Z or centennials (1996-2015). Each of these generations brings different expectations to the workplace, but there are certain elements of the workplace with which most employees can agree, and leaders must adjust our thinking to attract and retain this fastest growing segment of the workforce.

A 2021 study published in the MIT Sloan Management Review identified the 10 elements of culture that matter most to employees. The top three elements were feeling respected, having supportive leaders and having leaders who live their core values. Toxic managers and unethical behavior by managers and other employees were listed as numbers four and five, followed by elements related to compensation (benefits, rewards, learning and development), job security and corporate reorganizations.

How do we use this information to create a culture that embraces and celebrates the diverse community that is today’s workforce? First, we must identify and embrace core values that are a non-negotiable part of an agency’s DNA and then ensure those values become ingrained in every employee.

Identifying core values starts with the leader. Perhaps the leader values integrity, candor, consistency and punctuality. Those values should become part of the organization’s ethos. However, the process does not stop there. We must identify what is important to employees and incorporate those things into the culture of the organization. Perhaps employees value inclusiveness, teamwork, cooperation, flexibility, respect and the ability to participate in community service projects while on the clock. None of those values is in contrast to the values of the leader, so how can we use them to build a culture that is not only accepted but also lived?

Defining the behaviors that illustrate core values in action is the next step. What does integrity look like? Is it accepting responsibility for our mistakes, even when nobody knows we made them? What does inclusiveness mean? Does it mean accepting and embracing differences in culture, sexual orientation and race? Or does it go further to include diversity of opinions, where all employees feel safe in respectfully sharing their ideas and suggestions for new initiatives?

Next, leaders must incorporate the agency’s core values by communicating them to current staff and hiring new employees based on how they will fit with the agency’s culture. Communicating core values is the easy part; living them is harder. Rather than taking shortcuts because of staffing shortages or budget restrictions, leaders must recognize that many of the problems they have start with the culture that has been fostered, whether intentionally or by mistake. Taking the time, making the hard decisions and holding oneself accountable to live the values one claims to find important can reap benefits far beyond the immediate crisis.

An agency known for supporting its employees and operating within a set of carefully considered values will retain employees and attract quality applicants far quicker than one known for its toxic culture where employees feel disrespected and unsupported by their leaders.

As we look forward to National Public Safety Telecommunicators Week, let us all dedicate ourselves, regardless of rank or title, to do the hard work necessary to create environments in which every employee feels valued and accepted every day of the year.

Angela R. Batey, RPL, CPE, is the Director of the Office of Professional Standards at the Georgia Public Safety Training Center in Forsyth, Georgia. She has worked in public safety communications for 34 years and is the President of APCO International.
Sharing Real World Incidents to Educate Policymakers

Policymakers often lack awareness of the work performed by public safety telecommunicators due to the behind-the-scenes nature of the work. APCO’s government relations team seeks to change this by educating policymakers about the role of 9-1-1 and the lifesaving work performed by public safety telecommunicators. Citing real-world incidents can help to illustrate the operational aspects of 9-1-1 call taking and dispatch, and when incidents receive substantial news coverage or have a personal connection to the policymaker, they can be even more impactful. Here are two examples of incidents we shared last year to explain the incredible work that APCO’s members do and our legislative priorities.

HOME INVASION OF A MEMBER OF CONGRESS

In October, a man broke into Congresswoman Nancy Pelosi’s home and confronted her husband. Mr. Pelosi was able to call 9-1-1 without the intruder’s knowledge and discretely signal to the public safety telecommunicator that he needed help. Using her training and experience, the call taker identified the nature of the situation and determined that the incident required an urgent law enforcement response. News reports described the 9-1-1 professional’s work as “lifesaving,” and Congresswoman Pelosi released a statement expressing gratitude to the emergency responders involved in the response, including the 9-1-1 professional who handled the call.

ACTIVE SHOOTER IN CHESAPEAKE, VIRGINIA

In December, a mass shooting occurred at a Walmart in Chesapeake, Virginia. The initial call that came into the Chesapeake emergency communications center (ECC) was from a Walmart employee tending to another employee who had been shot. The public safety telecommunicator provided CPR instructions over the phone. ECC personnel soon determined that this was an active shooter scenario. As calls came in, public safety telecommunicators provided instructions to callers while collecting more information about the incident and conveying that to first responders in the field. Two public safety telecommunicators deployed to perform tactical dispatch at the request of the SWAT team to help coordinate communications and response on scene.

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MAKING THE CONNECTION TO APCO’S ADVOCACY

Public safety telecommunicators often receive calls where the caller is unable to communicate openly about their emergency — providing lifesaving instructions while gathering critical information during an ongoing emergency is inherent in the job. Thus, in a sense, these incidents might be seen as examples of the typical work that’s expected of public safety telecommunicators. However, with incidents like this, press coverage and constituent connections can make it more likely that members of Congress will pay attention and see the connections between real-world emergencies and APCO’s advocacy.

Consider a few of APCO’s advocacy priorities. With the 9-1-1 SAVES Act, we’re seeking to fix the federal classification of public safety telecommunicators in the Standard Occupational Classification by changing the classification from “Office/Administrative” to “Protective Service.” With the PROTECT 9-1-1 Act, we’re trying to support public safety telecommunicators’ mental health by, among other things, increasing access to resources like peer support programs. APCO has also pushed Congress to provide federal funding for Next Generation 9-1-1 to ensure public safety telecommunicators have modern tools to do their jobs, including the ability to receive, analyze and share multimedia information with other ECCs and first responders in the field.

For each of the incidents described above, the work performed by public safety telecommunicators was inarguably “protective.” Having advanced communications tools through NG9-1-1 — for example, video from home alarm system or store security cameras — could have provided critical information to the ECC and improved the emergency response. And dealing with the stress of these life-or-death situations, perhaps while hearing someone being attacked, takes a toll on public safety telecommunicators’ mental health. Thus, real world incidents offer a compelling explanation of APCO’s legislative goals.

We strive to represent APCO’s members and highlight the work they do with the utmost respect for their dedication and the gravity of the job. Increasing awareness of the lifesaving work of public safety telecommunicators supports our advocacy and results in much-deserved recognition for these professionals.

Jeff Cohen (cohen@apcointl.org) is Chief Counsel and Director of Government Relations for APCO International.

Mark Reddish (reddishm@apcointl.org), Senior Counsel and Manager of Government Relations, and Alison Venable (venablea@apcointl.org), Government Relations Counsel, also contribute to this column.
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Maureen Will Announces Candidacy for 2nd Vice President

By Maureen A Will

My name is Maureen Will and I am running for the 2nd vice president position with APCO. I am currently the director of emergency communications for the Town of Newtown, Connecticut. I have worked in public safety for my entire 40-plus-year career. In early 2000, I joined APCO International as a newly appointed captain in charge of communications. At the time, Connecticut had begun requiring emergency communications centers (ECCs) to provide emergency medical dispatching. I was assigned the task of evaluating and selecting a vendor for our EMD program. I contacted APCO to obtain information about their EMD program. That phone call started a strong relationship between myself and the association, and I am proud to say that relationship remains intact today.

As my involvement with APCO grew, I attended my first conference, which was a regional conference in North Carolina. I quickly learned that no one sits alone unless by choice and that we are all a family of public safety telecommunicators. I continued learning about the association and chapter by attending conferences, going to meetings, listening, networking and asking questions. Time passed and I retired from my law enforcement career of 30 years. Within a few months, I began my second career as the director of emergency communications in my hometown.

It continually astounds me how the membership helps and supports each other. I had just enrolled in the RPL program when in December 2012 my community was thrown into the spotlight after we experienced a horrific tragedy. The arms of the communications family that surrounded my center was a feeling that I will never forget. The APCO Board of Directors came to my center to meet and talk with my staff. The Board of the Atlantic Chapter honored each telecommunicator, recognizing the difficulty of the event and what would be coming in the weeks, months and years that followed. As a result, compassionate care became my passion as I recognized the importance of peer support and how small tokens from our communications family can make a huge difference. That tragedy also led me to vice-chairing the Emergency Communications Center Crisis Response Task Force where, in 2019, the “Emergency Communications Center Crisis Preparation Manual” was developed. This document is a best practice reference guide on responding to critical events and can be adapted to fit the needs of any agency.

After responding to a question on PSConnect, I developed a survey on aging in the PSAP. Subsequently, President Cheryl Greathouse appointed me to chair a task force on that very subject. This ultimately led to committee work on ProCHRT. In addition, I have worked on the P43 work group and chaired the APCO By-law Committee. I have served as the president of the Atlantic Chapter and most recently I chaired the APCO International’s 2022 Annual Conference & Expo in Anaheim, California. I also have worked on the Standards and Development Subcommittee and currently vice-chair the Agency Training Committee. I am also proud to be a senior and life member of APCO and have achieved my RPL and CPE designations.

Now that you have learned a bit more about me, my career and my history with APCO, you are probably wondering how electing me 2nd vice president will be beneficial. First and foremost, I will always be committed to APCO and advancing the mission of our association. I understand the importance of representing each and every one of you, the members of the association. Your voice is vitally important to continuing the good work of the association and ensuring that we have a seat at the international table of leaders who will shape our future as public safety telecommunicators. I also feel strongly about advancing the mental health and wellness of telecommunicators, technology, NG9-1-1 and continuing to ensure that telecommunicators get the recognition for the important job that we provide.

After learning and benefiting from my association with APCO over the past 22 years, it is now time to give back to the association. As your 2nd vice president, I will have that opportunity to mentor and inspire the next generation of leaders within the association. I will ensure that your comments and concerns are heard. I would be humbled and honored to earn your vote. If I can answer any questions, if you would like to learn more about me or if you would like to hear about how I will succeed in the role of 2nd vice president, please reach out to me. Having an open-door policy and being transparent are crucial to the success of any board position and that starts now and will continue throughout my time with the Board of Directors. Thank you and most importantly, stay healthy and safe.

Maureen A Will, RPL, CPE, is the Communications Director at Newtown ECC, in Newtown Connecticut. She can be contacted at maureen.will@newtown-ct.gov.
It’s such a strange job. Everything I say is recorded and can be listened to at any time. Of course, that’s to make sure that I’m protected if a caller complains — did I give the correct information, did I handle the call appropriately, did I say or do anything that negatively impacted the outcome of the call. Every priority call I handle goes through a quality assurance screening. In addition to that, calls are chosen at random to be QA’d. It’s in the back of my mind on every single call — someone might have to listen to this call. Maybe it will be QA’d. Maybe the prosecutor will listen to it, and it will be played in court. Maybe the media will request a copy of the tape, and it will be played on the nightly news. Each of these scenarios has happened to me.

My calls are frequently QA’d, and I am given feedback on my call handling. A prosecutor once recommended I be fired for my handling of call, and it was determined I had followed policy so I was safe. The time during the investigation was miserable, and I thought about quitting every day. On my third day working on my own, I handled a call that was requested by the media and made headlines across the country playing on the news and radio. That call still lives online and anyone who might want to hear it can...
still listen. All of these individual incidents have shaped my perspective of media and how information is relayed and how situations are presented.

In addition to these stressors, I happen to work in a county that has the smallest officer-to-citizens ratio in the country. I constantly wonder if units in the field are safe and have enough support responding to calls.

These things, as well as the content of many calls, have given me pause to reflect on the untold and sometimes unknown impact of answering emergency calls. These elements come into play every day as we show up to put on the headset and brace for impact.

The following is a collection of a few calls over my 16-year career. Some I handled; some were handled by my partners. All have left their imprint one way or another.

**ALIVE ONE MINUTE**

Every time a motorcycle crashes, I check the call to make sure it isn’t you. We have been married for six years and I still worry you’re going to crash one day and die in the road.

It wasn’t you again tonight. Thank the universe. But it was some other poor soul. Wasn’t even going that fast. Alive one minute, dead the next. I had taken a call from someone who lived nearby and heard it. It was dark out, and they didn’t leave their house. It went out as an assumed motor vehicle crash. Other people started calling it in shortly after, and they all reported that the rider was obviously deceased. I’m sure it was traumatic for each of them. Seeing a body lying in the street; not knowing who it was but knowing the blood coming from under the helmet meant he was gone. Sometimes I think about those people. The ones that aren’t really involved but sort of second-hand involved. What story do they tell their families when they get home? Do they wake up in a cold sweat at night, reliving the crash, seeing the blood again and again?

***

Forty minutes after the crash your husband’s fatality call was on my screen. I looked at it and lied to you. You called and were trying to hold back tears, saying something was wrong. Your husband wasn’t home yet, and did we know if there were any accidents in your area involving motorcycles? I told you I wasn’t aware of anything but would have an officer call you and check into it. That’s our policy. I can’t tell you your husband is lying dead in the street half a mile away from your house. That he almost made it home but now he’s never coming home again. I hang up the phone and imagine the officers coming to your house to tell you. You already know, in your heart, that something is very wrong. You mentioned you had a son. I wonder how you will tell him.

I leave myself on not-ready mode for a few minutes so I don’t get another call. I grab a tissue and dry my eyes. My chest hurts. I’m crying for you, but I’m crying for me too. I love someone too, and he is also dying. A much slower death, from pancreatic cancer. Some days I can’t concentrate at work, and I just take a break, walk around the parking lot and cry. I guess we are all losing people all the time. I just see it more than most.

**THE FAVORITE**

I’m sitting next to one of my work favorites. He is funny and wonderfully drama free. He’s very nice and my day always seems more mellow when he is here. He is slow to get frustrated, and even the meanest callers don’t bother him. On this day, we’re sitting next to one another at stations that are so close you can hear when callers are screaming on the other person’s line. Or, as it happens, you can hear gunshots. The phones weren’t busy; it was just another dull day. We were chatting about nothing important when his phone beeped and he answered with the normal greeting, “9-1-1, what are you reporting?” An irate screaming male was on the line. I couldn’t make out exactly what the caller was saying. My favorite was focused, as he always is. He tried to calm the caller down, to find out what the issue was. His voice is so soothing. I like to sit next to him, because it helps me stay calm. He was talking calmly, and I just watched him. Serene face, kind voice. And then I heard it. The unmistakable
There were stories about us in the news all the time. Mostly for not doing our jobs. Sometimes for going above and beyond. Most of us hate the media because they almost never get it right. We’re told in training our calls are subject to public disclosure. People can request copies of the tapes and sometimes they are played on the news. I remember that part of training well. We’ve had some major calls in our area, and I remember hearing calls played on TV and splashy headlines in print. In training, I remember thinking how maybe one day, years into my career as a call taker, one of my calls might end up on the news. I might experience that feeling of going from anonymity to being the object of public scrutiny by thousands of people who have never done the job. I could never have imagined it would only take three days.

It was my third day working alone. I went on my last break, and I came back feeling glad I only had another two hours. Home stretch. I was feeling more confident since I had been working on my own the past few days. It was exciting. I still had some nerves, but I was finding my stride. It was about 9 p.m. when the call came in. “9-1-1, what are you reporting?” Screaming caller, crying, very hard to understand. “My dad’s been shot!” I get medical aid on the line. They ask their questions, and I ask mine. Where are the suspects? What do they look like? I’m talking to a 10-year-old boy. He doesn’t have the information I need. The suspects left. He doesn’t know what they look like.

The next day, and the day after, and the day after that, his 9-1-1 call is played repeatedly on the television and radio news. I heard it — my voice sounding foreign to me — in the car on my way to work. My sister calls and asks if I’m OK, because she recognizes my voice in the call. That call was two minutes of a crying kid who just saw his dad murdered in front of him in their house. Why would anyone want to listen to that? Exactly what was gained and who was helped by playing it repeatedly on the news? I walk into work and sit at my desk. I’m starting to understand why most of us hate the media now. Even though I am developing a growing distrust for the media, I also need them. They’re the only ones that can bring closure. They’re the only ones that can tell me details as they unfold. Through the media is how I learned four suspects were arrested. I was glad, but that closure never came.

**THE SHOOTING**

I have a co-worker who is always quiet. You never hear her raise her voice. I’ve been at work for hours sometimes and have not even realized she was there. I’m sitting next to her one day and her phone beeps. Her voice strong, but quiet, “9-1-1, what are you reporting?” “You’ve been shot?” Oh crap, I thought. I mentally prepared myself for the phones to start going crazy. A shooting. Questions flew through my head at rapid speed. Multiple casualties? Public place? Suspect on the run? It was going to be a long night full of confusion, chaos, media and utter hell. “Wait, you’re saying the officer shot you?”

I wanted to know what was happening. And I really, really did not want to know what was happening. She was on the line with the caller when she took her last breath, crawling on her hands and knees through the forest behind her house, trying to escape her son-in-law, one of our own deputies, who had just killed her husband and shot her. I’d never been more frightened in my life.

**GOING PUBLIC**

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**LANGUAGE**

“9-1-1, what are you reporting?” The calmness in your voice made me think it was a routine call. You said you were reporting a train accident. We have lots of train tracks in our county. We have agricultural trains and we have transit trains. Ok, accident, I think to myself. “Anyone need medical aid, any injuries?” I ask. “Um, yeah. A train just fell off the overpass onto the highway,” you say, your voice suddenly void of the calmness from seconds before. “Oh, crap,” I say and connect you to medical aid. I listen as they get the location and information they need.

In my head: shit, shit, shit. This is going to be all over the news. People are dead. The highway will be shut down. This is national news. I said crap on a recorded line; I’m definitely getting in trouble for that. The rest of my shift was caller after caller after caller with issues, questions and concerns about the train derailment. My best friend was texting me — her sister was at the scene, just happened to be driving by. She was trying to pull bodies from the train and provide whatever aid she could. We were so inundated with calls I couldn’t comfort my friend. Another caller asking if their loved one was on the train, because they aren’t answering their phone? Crying, sobbing, panic, grief. And then this guy: jerk calls 9-1-1 to complain about the police not doing enough to help with the traffic flow due to the back-up caused by the derailment. I was nice to him, and as soon as he hung up I muttered, “You asshole, people just died.” It did not make me feel any better calling him an asshole.

The second part of this feature will appear in the May/June issue of PSC magazine.

*Maggie Eastman is a Public Safety Telecommunicator with South Sound 911.*
A Portrait of Controlled Chaos

By Christine Massengale

Occasionally, we receive article submissions that attempt to paint a picture of what it means to be a telecommunicator. When our editor described this piece as “difficult to read,” we weren’t sure what he meant — was it poorly written or highly technical? No, he clarified that it was a montage of personal experiences from the author and harshly eye-opening for those who do not work in this industry.

Sight unseen, I suggested if necessary we could add a “trigger warning,” but wondered if it was really that bad. When I finally had the opportunity to read it, I had to set it aside several times. Anyone who has worked in this industry for several years has experienced many of the scenarios described. None of these stories are shocking for anyone who has been in the trenches. They do evoke recollections over one’s career of the vicarious trauma we have all experienced at one time or another — cycles of fear, anxiety, desensitization, compartmentalization, empathy, apathy, anger, sadness and so many more emotions that peel back the layers of what it means to be both human and humane while fulfilling a role that, at times, deals with the absolute worst of humanity.

When I assumed a leadership role, my perspective changed. My vicarious trauma now manifests from watching my employees cope with their own traumatic experiences with critical incidents, line of duty deaths and fatalities. The weary phone call in the middle of the night that begins with “I hate to wake you,” or the strained looks on faces; tight-lipped concentration, eyes glued to the CAD screen. When you walk into a center and everyone is standing up at their consoles, or it is unusually quiet, or unusually tense, banging keyboards, muttered curses, false bravado, and always on the edge of flying apart while simultaneously holding everything together — the proverbial controlled chaos.

Years ago, while visiting the vendor hall during a conference, I stopped to admire some work chairs. I squeezed the arms and padding of the chair and asked the salesperson, “Are these pick-proof?”

“Pick-proof?” he asked.

“Yes, you know — is this cushion material pick-proof? Because dispatchers like to pick at things. They pick at the chair arms, the desk top edges, really anything that can be, well, picked apart.” The salesperson nodded in understanding and assured me their chair materials are pick-proof, but I knew he didn’t really understand at all.

No one can fully grasp the impact this job has on its employees unless they have lived it, but the evidence is all around us in the picked-apart chair arms, the fridge full of energy drinks and comfort foods, the employee that literally vibrates at their desk because they are a foot-shaker, or the employee who is a pen clicker, gum chewer, crafter or knitter. Constant stimulation is the coping mechanism, because down-time means time to think and feel, and there is no place for that. Life or death decisions are made in fractions of a second, but ordering takeout requires a blind draw from a list of restaurants or menu roulette to come to a consensus.

As the author so simply states, “It’s a strange job.”

Christine Massengale, ENP, RPL, is Dispatch Coordinator, Tennessee Highway Patrol and Chair of the APCO Editorial Committee.
While public safety telecommunicators’ exposure to others’ trauma is part of the profession, the chance of experiencing a personal tragedy during a telecommunicator’s career is also a reality. As a result of exposure or involvement in a traumatic event, post-traumatic stress disorder (PTSD) may occur and have a major impact in the life of a telecommunicator. According to the National Institute of Mental Health (NIMH), “PTSD is a disorder that develops in some people who have experienced a shocking, scary or dangerous event.” While there are telecommunicators who recognize professional resources are imperative to continue in a demanding profession, others internalize feelings and avoid seeking resources due to fear of judgment or having their information not remain confidential. Addressing and recovering from PTSD is possible with options that may include peer support, other mental wellness resources offered by your emergency communications center (ECC) or private options that may diagnose PTSD. For most people, PTSD is short-term. By seeking help immediately with available resources, PTSD sufferers give themselves a higher probability for proper recovery and can more readily see a path to remaining in their chosen field. As telecommunicators, we work under a common theme of “controlling situations,” but we do not have control of traumatic events happening to us. However, we do control our response and decide if we call it quits or continue in the 9-1-1 profession.
While leading an amazing team of telecommunicators, personal tragedy happened to me, and I questioned whether I would continue in the 9-1-1 profession or if I would quit.

On a Sunday night in August 2015, my life changed forever. My brother was in imminent danger, and I knew that I would have to call 9-1-1 in my native state of Alabama, where I no longer resided. My father served in public safety for 27 years in Alabama, so I had the phone number for a non-emergency police response memorized. That night I dialed the non-emergency phone number for the police and I became that frantic caller on the other side of the phone without an address and in extreme panic mode. I could not remember the street name or the specific name of the public location where my brother was experiencing a crisis. Frantically, I attempted to recall the street and location name, but I could not. There was only a visual recollection of the location so I had to provide descriptive information to the telecommunicator who answered my call. Once he understood what I was communicating about my brother’s location, he assured me that a response was enroute, due to another call received at the ECC. Tone speaks volumes, and the telecommunicator’s tone was of genuine empathy.

That tragic night I joined a group that I did not know there was a name for and that I did not want to be a member of — “survivor of suicide loss.” After a couple of weeks, the reality of the loss of my brother felt like a severe gut-punch and heart-ripping pain, introducing emotions that I neither understand nor recognized. I would report to work and make every attempt to motivate my team, but on the inside I was drowning in a pool of painful feelings. I had to decide which journey to take — heal and continue leading a team in my profession, or heal and detour from the profession. If I decided to continue in the profession, I would have to figure out my course of processing the loss. I discovered that a strong support system is crucial, in addition to a well-rounded plan including multiple resources. I credit a peer support group as being instrumental during my journey to process my grief and trauma.

Peer support is one resource that ECCs continue to introduce as a method for telecommunicators to speak with a peer in a confidential manner. The state of Alabama
(the destination of my call that night) took a large step in 2018 with Gov. Kay Ivey signing a statute into law, 36-21-14, requiring confidential peer support for public safety employees, which includes telecommunicators. The Alabama Law Enforcement Agency (ALEA) coordinated the operation of peer support with the Alabama Alliance for Peer Support (ALLEAPS). The statute states that all communication with a certified peer support member is privileged and confidential. Certified peer supporters in Alabama’s program receive training to proactively recognize signs of trauma in telecommunicators. Additionally, the state’s peer support program travels throughout Alabama and will assist other states. In the event of trauma connected to an ECC or a personal trauma experienced by a telecommunicator, peer support is “boots on the ground” within three hours.

I participated in the survivors of suicide loss peer support — strictly for those with suicide loss — rather than ECC peer support programs, which are a great resource for recovery and healing from trauma. I incorporated resources outside my agency as it was the best fit for what I needed, specifically with coping mechanisms for triggers from listening to 9-1-1 audio involving suicide and certain violent crimes. To avoid triggers, my television consumption changed from crime shows to light-hearted comedy. For two years following my loss, I was intentional about accepting the resources and practicing self-care so I could remain emotionally available for my family and work team. My small professional support system was exceptional and respected my privacy, providing reassurance that I was on the proper path for healing and continuing in the profession. Although the path was initially challenging, through the healing process and managing the triggers I figured out a greater purpose from the pain. That purpose was and remains to authentically see past the exterior of those with whom I cross paths both personally and professionally. We all have a story, and one kind word can keep someone from “falling off the cliff.” Volunteer work in the mental health arena is part of my continued healing, in addition to having a strong awareness regarding self-care. For me, self-care includes meditation, listening to music and dancing like no one is watching. Seven years after my traumatic experience, I am proud to say that I healed from my trauma and remain in the 9-1-1 profession. I continue to have contact with the members of the survivors of suicide loss peer support group that were instrumental in my journey, but our relationships have morphed from helping each other survive to helping each other thrive. I address each day with a positive mindset, ready to help others.

If you are experiencing trauma or PTSD, know that resources are available and there is hope. Own your story, release the trauma, and know that you can recover with the assistance of a great support system and professional resources.

Dr. Tim Faulk contributed to this story.

Patrice Coleman, RPL, ENP, CMCP, has been in public safety communications for 21 years and is the Training and Quality Assurance Manager for Metropolitan Nashville Department of Emergency Communications. She holds a Master of Business Administration. Coleman is also a crisis intervention trainer for dispatchers. Coleman is the second vice president for Tennessee APCO.
Deinstitutionalization in the early 1960s caused those who suffer with mental illness to either hide their illness due to stigma or have increased contact with law enforcement. The goal of deinstitutionalization was to take better care of those in need, but significant barriers arose in the following years that remain unaddressed today.

Crisis intervention team programs are geared toward defusing encounters between law enforcement and people suffering a mental health crisis.

By Cynthia Fell
**Q&A: Crisis Intervention Team Training for Public Safety Telecommunicators**

By Cynthia Fell

Andrea Smith, director of innovation & community engagement for the Detroit Integrated Health Network, discussed development of their crisis intervention team training program and its impact on service. Answers have been edited for clarity.

**Q:** **WHEN DEVELOPING A CLASS FOR PUBLIC SAFETY TELECOMMUNICATORS, HOW DID YOU FOCUS ON WHAT TO TEACH?**

**A:** Initially, with the 40 hours, we invited a handful of telecommunicators. They really enjoyed the course but said that several units (specifically hands on units) were not applicable because it was not likely that they would ever use these skills in their professional roles. We looked at the units that were informative and allowed telecommunicators to support officers/other first responders as well as possible. Based on feedback from 80 staff in 2020, we firmed up our course and have been going strong.

**Q:** **IF SOMEONE IS READING THIS ARTICLE THAT DOES NOT HAVE A PROGRAM IN PLACE, WHAT IS YOUR ADVICE? HOW DO THEY START?**

**A:** I would say take a look at your community as a whole and calls for service. Based on this and the feedback of those responsible for emergency services deployment, do what you think will be impactful to your community? Buy-in from the top to bottom is essential.

**Q:** **DO YOU THINK THAT ADDING CIT PROTOCOLS MAY OVER-BURDEN A TELECOMMUNICATOR?**

**A:** Absolutely not. I think this will ease some of their burdens. Public safety telecommunicators are given options that support them in making decisions — providing them with a sense of gratitude that they are assisting someone in getting treatment. Knowing that a citizen is in crisis and you have proper options and resources to help them allows that telecommunicator to have a stake in building community resiliency.

**Q:** **CAN YOU RECOUNT A SUCCESS STORY, ONE WHERE A TELECOMMUNICATOR PLAYED A CRITICAL ROLE IN FINDING SOMEONE HELP?**

**A:** There have been several success stories, but one that I experienced firsthand recently was when a public safety telecommunicator knew that someone needed help, but there were no designated CIT patrol cars in the area at the time. This individual went above and beyond. She kept the citizen on the line and added me to the call to do a warm hand-off after she realized that he was truly experiencing a mental health crisis. After I gathered information, I added a CIT supervisor to the call, and we stayed on the line with this citizen who was scared, outdoors, in the elements the whole time until the CIT supervisor and an additional unit arrived on scene. The individual was transported to a crisis center, and everything worked out.

The lasting impact of programs such as CIT is that it focuses on providing help to those who need it. It brings service to the forefront of policing and bolsters public opinion of the type of service their police provide. The telecommunicator’s role in CIT embraces the tenet that the telecommunicator is the first first responder. It allows those professionals to play a part in a safe solution to those we serve.

Mental health services are lacking in the United States. The barriers to these services have been researched extensively and the main issue is affordability. Mental health services often are needed for a lifetime, so it can be a significant financial burden even for those with health insurance.

Mentally ill people who go untreated and unidentified are often funneled into the criminal justice system and find it impossible to get out. Recidivism leads to poor treatment — or no treatment — in correctional facilities, impeded ability to care for oneself when not incarcerated and a greater likelihood for contact with law enforcement.

So how can law enforcement help break the vicious circle between mental illness and incarceration? Crisis intervention team (CIT) programs are one answer to that question. CIT programs “bring together law enforcement, mental health professionals, mental health advocates...and other partners to improve community responses to mental health crises,” according to CIT international. The group describes the goals of CITs in response to people suffering from mental health crises as:

- Improving safety during encounters with law enforcement.
- Connecting people with timely, effective services.
- Increasing mental health and allied professionals in response and using law enforcement “strategically such as when there is an imminent threat to safety or a criminal concern.”
- Reducing trauma during such crisis and contributing to recovery.

CIT focuses on relationships between the person suffering from a mental crisis and the public safety telecommunicator, police officer and mental health professional so communication should be seamless among these parties. Each cohort is one piece of the puzzle, and all must share information.

Departments should begin the process of starting a CIT program by asking a couple of questions about their operations. These
311 Diversion Promotes Efficient Public Safety Response

By Patrice Coleman

As more conversations occur regarding crisis intervention teams as an alternative response for processing and dispatching calls in emergency communications centers (ECCs), 311 is also an option in making operational adjustments. 311 is more than a city service. It is the hub of non-emergency requests. 311 promotes efficiency in answering 9-1-1 calls and reduces misuse of emergency services. Use of 311 means public safety telecommunicators are more readily available, resulting in better answer times and compliance levels in accordance with national standards.

311 is a non-emergency line and can be maximized for more than the traditional pothole, lights-out or trash pickup calls. I recall times of calls received at the ECC inquiring about the proper trick-or-treat time, the date of the next Christmas parade and even the sun not rising at a specific time (it was the first morning of daylight savings). If those calls are routed through 311, the telecommunicator should not receive the call.

Stephen Martini, Director of Metro Nashville Department of Emergency Communications (Metro Nashville DEC), has moved the department toward 9-1-1 for emergencies and 311 for non-emergencies. In February 2022, a campaign commenced to “Hub It” in Nashville if the call was not a 9-1-1 emergency. As a result of addressing misplaced calls with a strong campaign, Metro Nashville DEC continues to experience a monthly average decrease of 40,000 non-emergency calls. Academies training new telecommunicators are presenting lessons about 311/Hub through collaborative efforts with 311/Hub leadership. In addition to 311/Hub, the city of Nashville also offers online reporting via the city’s Hub website for certain incidents.

There are options in implementing alternative responses in ECCs, whether it is CIT, 311 or another option. The goal is to answer 9-1-1 calls effectively and efficiently while providing the best response.

Patrice Coleman is Training and Quality Assurance Manager at Metro Nashville Department of Emergency Communications.

CIT focuses on relationships between the person suffering from a mental crisis and the public safety telecommunicator, police officer and mental health professional, so communication should be seamless among these parties.

Cynthia Fell is the Communications/Records Supervisor at Plymouth Township Police Department in Plymouth Township, Michigan.

REFERENCE
THE FIRST RESPONDERS FRONT

How Ukraine’s first responders and their infrastructure cope with war.

By Jeff Winbourne

As dawn broke on February 24, 2022, Russia invaded Ukraine, an event that changed the lives of all Ukrainians and many people throughout the world. The media has reported on the war extensively, its impact on civilians and the fighting itself. There is widespread destruction of hospitals, apartment buildings and schools. As of the end of November, over 6,500 civilians have been killed, 10,000 injured and over 7 million have left the country.

Although dramatic photos of firefighters entering bombed out buildings or fighting fires are often shown on television, little of the war’s impact on the first responders is reported. They are not in direct military action, but Ukraine’s first responders are under constant threat of attack, regularly working under gunfire and shelling. Firefighters, police, medics, emergency managers, utility workers and public safety telecommunicators have experienced vast destruction and trauma. Making do without safety equipment, medical supplies and other standard equipment is a daily challenge.

Witnessing human trauma in their own communities on a scale not seen in Europe since World War II, is a near-daily experience for Ukraine’s first responders.

Let’s look at the work of the State Emergency Service (SES) of Ukraine, Ukraine’s fire and rescue service. From the start of the Russian invasion on February 24 to November 1, 2022 (statistics do not include police and emergency medical data) SES has:

- Made more than 62,000 runs in response to shelling, responding to emergencies including fires, trapped people and damaged infrastructure.
- Neutralized about 245,000 explosive objects of various kinds.
- Saved more than 6,500 people in collapsed and burning structures.

Author’s note: I wrote this article and interviewed State Emergency Service (SES) Deputy Chairman Roman Prymush November to December 2022. Some of the statistics mentioned have, of course, changed. War has a way of doing that. The dangers and responsibilities of the Ukrainian first responders on a daily basis remain. I worked with the Ukrainian police, fire and emergency medical agencies in the mid-1990s and again in 2011-12 setting up 112 centers in four cities — Kyiv, Lviv, Donetsk and Kharkiv. Donetsk is currently under Russian control. Writing this article helped me deal with the deep personal feelings that I have about the war and the respect that I have for the bravery of Ukraine’s first responders.
Major General Serhiy Kruk, head of SES, reported in October that since the start of the war, 45 rescuers have been killed, six captured and more than 150 injured. He reported that more than 150 fire stations were destroyed between February and August 2022, putting an increased strain on firefighting and rescue resources. Kruk also pointed out that emergency services had lost more than 300 pieces of firefighting equipment.  

**ADAPTING TO THE WAR’S NEW REALITY**

First responder standard practices, procedures and equipment availability were impacted within days of the Russian attack. Equipment was destroyed, often via multiple incidents occurring simultaneously in the same area. These and other factors forced Ukrainian first responders to adapt practices and procedures.  

Next, in addition to responding to multiple burning and destroyed buildings side by side, firefighters are also shelled during operations in some cases. Emergency crews now wear helmets and bulletproof vests on scene. The additional equipment adds about 45 pounds to the weight of their usual equipment.

According to Kharkiv’s Fire Chief Roman Kachanov, by August 2022, the region’s fire and rescue crews had tackled 1,700 fires that were the result of shelling since the beginning of the war.

Firefighters face new tasks, such as inspecting a massive bomb crater in the middle of the night to determine if it may contain unexploded munitions. They also face the risky task of putting out fires in a burning warehouse, without knowing what is inside. SES staff are demining farm fields, lakes, rivers, and other areas containing small bomblets from Russian cluster bombs and other artillery shells.  

In an interview with the author in November 2022, SES Deputy Chairman Roman Prymush, said, “The challenges change constantly, we are in a very dynamic environment.” He explained that “SES’s firefighting and rescue operations can shift to de-mining buildings and fields, to providing humanitarian assistance to the thousands of people in desperate need.”

Emergency Communications and Transition to 112

Currently, Ukraine has four emergency numbers: 101 for fire and rescue services, 102 for police, 103 for ambulance and 104 for gas shut off. But, Ukraine has applied to join the European Union and an operating 112 emergency communications system is a prerequisite for joining. So in September 2022, the Ukrainian parliament voted to begin using the European emergency telephone number 112. 112 will serve as the telephone number for calling all emergency services — police, fire and EMS. The new service is scheduled to launch this year in Kyiv and the Kyiv region.

The new 24-hour service will enable emergency services to automatically receive geolocation information of the caller, according to Ministry of Internal Affairs Deputy Minister Bohdan Drapyaty.

Since the Russian invasion, the workload on emergency communications centers (ECCs) increased by 45%, according to multiple sources. Emergency service delivery in Ukraine is organized at the city and oblast (county) level, as in the U.S. The lack of a single center of coordination among various operational and dispatching services within each city and oblast has slowed the much-needed multi-agency response.
The entire U.S. emergency services industry can support their Ukrainian colleagues in the war.

SES is seeking fire, rescue, hazmat, and medical equipment and supplies. SES's top needs are for ballistic vests with front and back protection, ballistic helmets and chemical cartridge/gas mask respirators. Contact The International Association of Fire Chiefs (IAFC) provides a link for donations of equipment and funds [https://www.iafc.org/topics-and-tools/resources/resource/equipment-and-supply-donations-for-state-emergency-service-of-ukraine](https://www.iafc.org/topics-and-tools/resources/resource/equipment-and-supply-donations-for-state-emergency-service-of-ukraine). The IAFC is collaborating with Poland to facilitate donations by its members. "Through this process, agencies and organizations can work directly with the Polish (National Fire Service and the Association of the Volunteer Fire Brigades) who will receive and route the incoming equipment donations directly to the State Emergency Service of Ukraine," the IAFC says.

The International Association of Firefighters (IAFF) is collaborating with the Canadian First Responders International Support Alliance to provide support to Ukraine. Go to [http://canrespondukr.com/](http://canrespondukr.com/) to help.


people needing evacuation or heating assistance, for example.

**DEMINING**

As the Russian military retreats from an area, SES (along with military units) sends in teams to determine the damage to the buildings and to the fields in agricultural areas. The buildings are often booby-trapped and the fields mined with explosives. Unexploded ordnance remains in newly liberated locations, including mines and bomblets from cluster bombs. SES estimates that over 150,000 buildings require demining, Prymush said, in addition to underwater demining in rivers and lakes.

Prymush explained that SES’s responsibilities also include removing what’s left of destroyed buildings. “We need heavy equipment to move rubble, but also (have a) need for drones or UAVs and assistance with transitioning the analog radio system to digital,” he said. Prymush estimated that it could take 10 to 15 years to complete the demining if the war stopped immediately.

**SUPPORTING BASIC LIVING CONDITIONS**

With about 75,000 officers nationwide, SES plays a key role in addressing the population’s living conditions as Russia has destroyed large segments of Ukraine’s power, water and heating infrastructure. The Ukrainian government is setting up warming centers throughout the country to serve as shelter against the Ukrainian winter. Certifying warming centers for people living without heat is one of SES’s responsibilities. In the Kyiv region alone, there are more than 300 shelters offering heat, electricity and drinking water for civilians.

**MENTAL AND PHYSICAL HEALTH**

Much like soldiers in a war zone, firefighters and other first responders are susceptible to developing post-traumatic stress disorder (PTSD). The long hours and the fight-or-flight adrenaline rush that comes with their work make every day a new and exhausting challenge. The added chaos of being located in the midst of nonstop shelling is especially difficult. Physical and mental exhaustion affects all of the Ukrainian first responders.⁴

**EMERGENCY MEDICAL AND HOSPITALS**

The World Health Organization (WHO) confirmed that by early May 2022, Russia had damaged or destroyed over 425 hospitals and clinics throughout Ukraine. By July, 24 hospitals and 123 medical facilities in Ukraine were destroyed by the invasion, while another 746 needed repairs.⁵

Issued in September 2022, WHO’s “Surveillance System for Attacks on Health Care” states that there have been 500 attacks on health care. Over 60 medical personnel were killed in the line of duty by the end of July. The attacks included those against health facilities, ambulances, medical personnel, patients, supplies and warehouses. According to some accounts, 150 Ukrainian medics are in Russian captivity.⁶

In addition to military emergency medical personnel, there are medics from the Ministry of Healthcare and volunteer organizations providing emergency medical help. Several nonprofit medical response organizations are also actively working in Ukraine, including the International Medical Corps and Doctors Without Borders. Many of these organizations are training Ukrainian civilians to be medics or emergency medical technicians (EMTs). The first of these EMTs were deployed in the first weeks of the war.

**POLICE — WAR CRIME INVESTIGATIONS**

The Ukrainian police play a major role in tracking down enemy collaborators, investigating war crimes, disappearances of individuals and issues related to the distribution of humanitarian aid.

Based on reports by multiple international news organizations, the Ukrainian police and army have recovered over 1,300 civilian bodies in territory recaptured by the Ukrainian Army since October. In the cities of Izium and Bucha, 447 civilian bodies were found in mass
burial sites. More than 500 civilian bodies were found in mass graves in the Kharkiv region after the Russians withdrew. Many more civilians were killed by the Russian bombardment of cities across Ukraine such as Kyiv, Kharkiv, Mariupol and others.

The police have also discovered 22 locations they suspect were used as torture chambers in areas of Kharkiv region alone as that region was freed from Russian control. Investigators have been gathering documents and other evidence from the sites and witness testimony, including from former detainees. These Russian torture chambers are found in nearly every area formerly occupied by Russian forces. For example, in November 2022, Ukrainian authorities uncovered 10 torture chambers in Kherson region after the Russians were pushed out of that region.\(^7\)

Ukrainian police are currently investigating 26,000 war crimes and officials believe there are more to be uncovered, according to a November 4 Sky News report. Ukraine Interior Minister Denys Monastyrskyy said war crimes have become “one of the biggest burdens” for police and those collecting evidence often work under fire. “We are also investigating those crimes committed by the political establishment of the Russian Federation, directing the troops and allowing them to commit war crimes such as rape, killing of children and killing civilians in general. They let their commanders do it,” Monastyrskyy said.

**UNITED STATES ASSISTANCE TO UKRAINE’S SES**

In addition to U.S. government military and humanitarian support, American firefighters have provided direct assistance to SES and the Ukrainian people, according to Prymush. U.S. first responders have provided humanitarian assistance, as well personal protective equipment (PPE) such as gloves, boots, helmets and turnout suits.

Jeff Winbourne is the President of International Services for Winbourne Consulting, LLC. He has worked in over 20 countries on emergency communications projects since 2004. These countries include Chile, Jamaica, Vietnam, Bulgaria, Jordan, Iraq, India and Poland. In many countries, he was responsible for developing the national design for implementing emergency communications.

**REFERENCES**

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SOLVING THE CONFERENCE CONUNDRUM

Every APCO member should experience The Annual Conference & Expo. Learn how to get there and what to do once you arrive.

By Tammy DeWolf

As a telecommunicator, I thought APCO International’s Annual Conference & Expo was probably for supervisors or directors, and it was too expensive to go, so for years I didn’t attend. What a mistake that was. I missed years of opportunities to meet new people, learn new things and get ahead in my career. While every experience and opportunity is what you make it, you can do as much or as little as you want and still have a great time at the conference.

I attended my first conference in 2017 in Denver. I was a little intimidated, wondering who I would walk around with, eat dinner with and talk to. I was going to the conference alone, or so I thought before I arrived. I quickly learned that I was not alone — I just didn’t attend with anyone else from my agency. I found comradery as soon as I arrived, and I met people that I still talk to from across the country. Going to a conference refreshes you, rejuvenates you and gets you thinking of all the great ideas the sessions expose you to. APCO also holds a first-time attendee meeting, which is a beautiful way to kick off your first conference adventure.

Budgets are a concern for many agencies so how can you get there? And how do you maximize your experience once you’re there?

GETTING TO THE APCO CONFERENCE & EXPO

Submit a request to attend the conference and include the reasons it would benefit you and your agency. Go online and include educational sessions you’d like to attend. If you’re in the market for new software or products, see if the companies you are interested in will be there. If your state reimburses your agency for training opportunities be sure to include that information as well.

There are several ways to cover the costs or at least some of the costs of attending a conference. See if there are scholarships you can apply for. If your agency is unable to send you, inquire if your APCO chapter has scholarships for training or conferences. Does your town, city or union have a reimbursement plan for training? Not all of these
options will be available for everyone, but many are available in some places.

One of the best ways to cover the cost of registration is to volunteer at the conference! Not only will you receive a complimentary day pass for every four-hour block that you volunteer, you will get a behind-the-scenes look at the conference and make some new friends to spend time with while you are there. The first 200 volunteers that are members in good standing and volunteer for at least four hours, will earn $100 for their local APCO chapter — a great way to justify attending to your agency.

One of the biggest hesitations about volunteering that I have heard from people is the fear of missing out on the conference. I understand the thought — why would you want to miss out on something you are trying so hard to attend? There are several ways to avoid missing out on conference activities. Volunteer positions start a few days before the conference begins. There are positions available over these few days to help stuff the conference bags, prepare the command center, man the registration desk, support emergency communications center (ECC) tour sign ups, staff the information booth and more.

During the conference, session proctoring is among the positions most in demand by conference organizers. Proctoring volunteers let the speaker know when speakers have 10- and 5-minutes left in their sessions. This is a good way to volunteer while attending all the sessions you want to see.

Volunteer positions are also available in the expo hall — from the Expo Quest to the K-9 demos and helping attendees during lunch hours — there is something you can do so you won't miss out on time in the exhibit hall. If you are worried about missing out on the ECC tours, there are several opportunities to volunteer during these events as well.

No matter what events during conference you are hoping to attend, there is sure to be an opportunity to volunteer so you can gain your hours while also experiencing everything the conference has to offer.

Another way to get to the conference is to be a speaker. We are always looking for new presentations and new voices. As a professional development session main presenter or co-presenter, you will receive one complimentary, full conference registration. Speaker recruitment is complete for APCO 2023 and will commence in the fall for APCO 2024. Have you presented at your local chapter? Why not submit it for the APCO Conference?
Are you a creative person? Each conference has a conference T-shirt. Before the conference, there will be a T-shirt design contest, and the winner will receive a complimentary conference registration. Why not submit an entry and give it a try? Your design should represent the host city, the spirit of APCO International and emergency communications.

Hopefully, now you are thinking of all the ways to get to the conference. The conference truly is an all-around wonderful experience that I hope all members get the chance to experience.

**MAKING THE MOST OF CONFERENCE**

Now that you have several ways to attend the conference, here’s what you can do while you’re there to maximize your experience.

Before you arrive, you can see all of the sessions listed online. There are many to choose from, and it’s best to have a plan of action. The sessions are categorized by professional development tracks, which include Communications Center Management, Cutting Edge Developments, Cybersecurity for Public Safety Communications, Emergency Preparedness Response and Situational Awareness, FirstNet: Transforming the Future of Emergency Communications, Frontline Telecommunicator, Wellness in the Emergency Communications Center, Leadership Development, NG9-1-1 and Emerging Technologies, and Radio and Wireless Communications Technologies. So much to learn and so much to bring back to your agencies. If you are looking for a solution, idea or more education in an area, you will find it at one of the many sessions or other activities (ECC tours, career advancement sessions, wellness activities and more).

The exhibit hall is massive. If you are in the market for a new console, radio, software system, chair, etc. you can find several options to choose from.

The expo is also a great way to get to know our commercial members. Building a stronger relationship with our commercial partners benefits all of us. We are the ones that use the products they are selling, so why not provide input on what you would like to see in the future or how something may be more useful if tweaked a certain way? Find out from them what will be available soon; it may benefit your agency.

Networking is one of the biggest reasons to attend the conference. I used to think networking was just a good buzzword for advertisements, but I was wrong. Networking is interacting to exchange information and develop professional and social contacts. Development is what happens at the conference because there is a comfortable, belonging feeling. We all share and collaborate naturally — this collaboration is networking. While it seems so simple, it truly is something that not only improves and expands your ability, thoughts and creativity, it also improves and expands that of your agency.

If you have any questions, don’t hesitate to contact me at President@apco-atlantic.org, especially about volunteering at the conference. You can also contact APCO about volunteering at volunteer@apcointl.org.

I hope to see you in Nashville in August!

**Tammy DeWolf, RPL, CPE, retired in October 2021 from the Berlin, Connecticut, Police Department. She is president of the APCO Atlantic Chapter and a senior member. She has served on the International Conference Committee as a volunteer co-chair.**

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In public safety, virtual consolidation or the sharing of technology is becoming more common for many reasons including economics, interoperability and real-time information sharing that is critical to the safety of our first responders. One of the greatest benefits in sharing a CAD system for telecommunicators is the ability to share information in real time. If you need mutual aid, you no longer have to call the other agency on the phone or hail them on the radio. You can send them a request via the CAD system, and the new call for service will appear in the assisting agencies call waiting screen.

What to consider when creating a technology sharing governance model.

By Julie Heimkes
An effective governance model should not only support the technology, but it should include policies and procedures that support the operational and strategic uses of those technologies.

One of the most important and often overlooked aspects of a shared technology project is developing an effective governance model. This is critical because without a solid governance model in place stakeholders have no control over the product, expectations or outcome. This could result in a technology project quickly going sideways. Installing new technology can be the easy part. Getting multiple agencies to agree on a governance model can sometimes be more challenging.

An effective governance model should not only support the technology, but it should include policies and procedures that support the operational and strategic uses of those technologies. It should provide a transparent picture of the project, processes, and regulatory and fiscal requirements.

Let’s break it down into five areas:
1. Purpose of the model — what is the goal of the model?
2. Scope of the model — what is governed?
3. Organizational structure — what is the hierarchy, positions, committees, etc.?
4. Roles and responsibilities — what are the committees responsible for and how do they work?
5. Cost allocation — identifying budgeting and fiscal processes including cost sharing and ownership of the equipment.

PURPOSE OF THE GOVERNANCE MODEL
First you must define the purpose of the model; for this discussion we are talking about sharing technology.

SCOPE OF THE GOVERNANCE MODEL
The next step is to identify what is being governed. Is it just technology or will the model support services, operational procedures and policies? A multi-agency governance model benefits from a clause that allows adding other technology in the future. Developing a governance model is time consuming, especially when each agency needs to obtain approval from multiple departments, including administration and legal. By listing each piece of technology as an exhibit, including the initial technology for which the agreement was created, the governing board can simply add another exhibit when new technology is needed.

ORGANIZATIONAL STRUCTURE
The easiest way to approach the model hierarchy is from the top down.

You know you will have a governing body or executive board that is formed pursuant to the governance agreement and is authorized to administer the agreement on behalf of the other agencies. Who makes up the governing board? Will each agency be represented by one or two members? Some agreements are very specific about the qualifications of the board members. For example, the board must include one representative of the city or county government and one public safety member with the rank of lieutenant or above.

Next is usually an administrative committee, which is designated by the governance board for the purpose of establishing operational policies, support, and recommendations for the project and services. The governance board will usually look to the administrative committee for recommendations, including changes to policy, operations, membership and technical specifications.

A change management committee or technical committee consists of a group of operational and technical professionals with specific knowledge, skills and abilities charged with executing software, hardware or infrastructure configuration changes to the technology being governed. This committee reviews requests from the administrative committee and will make recommendations regarding the impact of the request on the system. For example, if another agency were to join would the system have enough bandwidth and storage to support the addition?

The financial committee will oversee the costs, including operating expenses and capital budget issues.

Finally, the governance model should identify and define the stakeholders, agencies, vendors/suppliers and non-member/non-voting participants. It is becoming common for private businesses to use the same technology as public safety agencies, sharing in costs as everyone reaps the benefits of real-time information sharing.

There is no right or wrong way to do things when it comes to the number of committees, board structure, voting rights or meeting schedules. It is important to keep in mind that you may have a limited field of participants. A governance structure with five committees using the same personnel for each committee may be better served by fewer committees with extended obligations.

ROLES AND RESPONSIBILITIES OF THE ORGANIZATIONAL STRUCTURE
Each board and committee should have clearly defined roles and responsibilities. Some of the items that should be defined are:
1. Quorum: The minimum number of board members that must be present to hold a valid meeting.
2. Proxy: The authority to represent someone else, especially in voting.
3. Schedule: How many meetings will the board and or committees have per year? Who manages the agenda? How are meetings announced, tracked and managed? How does someone get on the agenda?
4. Structure: A clear definition of the structure, including positions such as chair, vice chair and secretary should be established for the board and the committees.
5. Responsibilities: Each board or committee should have clearly defined roles and responsibilities. For example, the
technical committee is responsible for reviewing any technical requests and can note the impact that request will have on the system. When defining the responsibilities, start out with a whiteboard session in which you list all tasks, actions and objectives that are part of the project. You can then take each listing, clearly define it and assign it to a committee or board.

**COST ALLOCATION**

One agency can act as the funding authority or fiscal agent, or it can be shared across several agencies. For example, one can serve as the treasurer and another agency can serve as the auditor for the governance model. The agreement needs to document the structure for the fiscal responsibility and oversight needed to operate and fulfill the governance model obligations. There should be strict accountability of all funds, including tracking receipts and distributions.

There are many ways to develop cost allocation models including those based on population, calls for service, staffing and even tax basis. The initial project may start with a grant and this should be taken into consideration for long-term funding. The most common mistake made when grant funding is involved is failure to develop a contingency plan in case grant funding is no longer available in subsequent years. There should be no financial surprises to participating agencies that their individual burden will increase upon loss of initial grant funding.

Another critical factor for the financial allocation is to have a clear path in case an agency withdraws from the project. Will the cost to the remaining agencies increase, or is there a contingency plan that will cover unexpected costs?

Writing a governance model is not the most exciting part of a new project, but it is perhaps the most critical part. As you start developing a governance model keep in mind the importance of the document — painting a very clear picture of the project, technology, services, operational procedures and policies. When you read the final document would you, as a new agency, have any questions? If you do not have any questions, then you have developed a solid governance model. ●

**Julie Heimkes** has been an APCO member for over 25 years and currently serves on the APCO Editorial Committee and the Membership and Chapter Services Committee. She is a subject matter expert and consultant with more than 30 years expertise in public safety management, operations, technical training and project management roles. Her public safety assignments include roles as paramedic, public safety telecommunicator, dispatch trainer, dispatch supervisor and center director. She can be reached at jheimkes@w-lc.com.

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It’s no secret that working as a public safety telecommunicator can be a tough job. For Spokane Regional Emergency Communications (SREC) telecommunicator Raegan Hays, that job can be even tougher as the single parent of two children on the autism spectrum. That’s why working to support other parents of children on the spectrum, as well as first responders in Spokane County, is so important to her. Hays has been with SREC for nearly 10 years, and in that time she has turned her passion for her kids into a true benefit for the community — and for her communications center.

In addition to being a parent and a telecommunicator, Hays is also a communications training officer (CTO) for SREC. In that role she educates new employees on how to manage emergency calls for those with intellectual or developmental disabilities such as autism spectrum disorder. Autism disabilities can present very differently from person to person with three levels of recognized impact. Hays’ children are no exception. While her older son has Level 2 — or moderate autism — her younger daughter has Level 3 autism and is severely impaired. For her son, this means some intellectual disabilities, but his primary struggle is with communicating and socialization. He knows he has autism and is aware of his differences. Like many on

continued on page 34
Resources from NCMEC for Supporting Children on the Autism Spectrum

This briefing summarizes information from the National Center for Missing & Exploited Children (NCMEC), established in 1984 with a mission to help find missing children, reduce child sexual exploitation and prevent child victimization. NCMEC has free resources and training to support caregivers, first responders and search teams and to mitigate missing incidents for children on the autism spectrum.

Autism Facts:
- In 2018, 1 in 44 children aged 8 were estimated by the CDC to have autism spectrum disorder (ASD).
- In 2021, 286 children on the autism spectrum were reported missing to NCMEC.
- Half of children with ASD wander/elope.
- Wandering occurs across all settings, by people with ASD of all ages, under every type of adult supervision.
- More than one-third of children with ASD cannot communicate their name, address or phone number.
- Risks increase with autism severity: drowning, exposure, dehydration, hypothermia, traffic injuries, falls, physical restraint, encounters with strangers, encounters with law enforcement.
- Individuals on the autism spectrum may have a co-occuring disability such as epilepsy, ADHD, sleep disorders, depression, anxiety disorders and schizophrenia.

NCMEC DATA (2011-2020)
The National Center for Missing & Exploited Children’s 10-year analysis of children on the autism spectrum reported missing to the Center showed that of accidental deaths, 84% were drownings.
A child on the autism spectrum may:
- Have a diminished sense of fear or engage in high-risk behavior, such as seeking water or active roadways.
- Seek small or tightly enclosed spaces concealing themselves from search teams.
- Be unable to respond to law enforcement because of their communication style.
- Be at a higher risk for exploitation because of their disability.
Communication and sensory processing may be characterized by:
- Verbal, non-verbal/non-speaking, minimally verbal.
- May use alternative modes of communication.
- May only cite scripts or use echolalia.
- May only understand direct language.
- May require additional processing time.
- Sensory overload (causes bolting).
- Hypo- or hyper-sensitivity to sound, light, touch.

BEHAVIORAL EFFECTS
Self-stimulatory behavior, also known as “stimming” and self-stimulation, is the repetition of physical movements, sounds or repetitive movement of objects common in individuals with developmental disabilities but most prevalent in people with autistic spectrum disorder. Such behavior can result in:
- Obsessive tendencies or interests, or rigidity.
- Impulsive actions.
- Repetitive behaviors that provide sensory stimulation (stimming).
- Anxiety can increase stimming.
- Challenging behavior could be caused by inability to communicate, pain, anxiety, defense mechanism.
NCMEC offers a variety of free resources for both first responders and caregivers. These include “Tips for Caregivers” (www.missingkids.org/content/dam/missingkids/pdfs/supporting-children-on-the-autism-spectrum-tips-caregivers.pdf), such as a 9-1-1 script, which provides guidance for families and caregivers on how to effectively communicate with emergency professionals.
the event of an emergency involving their child. This is a proactive measure to help be prepared in the event a child goes missing. NCMEC also has published “Search Protocols and Checklists for First Responders” (www.missingkids.org/content/dam/missingkids/pdfs/children-on-the-autism-spectrum-search-protocols-questionnaire-first-responders.pdf) and “Understanding Children on the Autism Spectrum: A Guide for First Responders” (www.missingkids.org/content/dam/missingkids/pdfs/understanding-children-on-the-autism-spectrum-guide-first-responders.pdf).

In addition, NCMEC provides virtual and in-person training on how to search for and protect children on the autism spectrum. Because of the high drowning rates documented with this population of children, teaching them to swim and immediately searching water are strong recommendations. 9-1-1 professionals are the first line of defense for ensuring swift and safe recoveries of missing children on the autism spectrum. They can provide first responders with critical information based on a few simple questions that can save lives.

SUGGESTED DATA SOURCES AND ADDITIONAL RESOURCES


For additional resources, please visit www.missingkids.org/theissues/autism and connect.missingkids.org.

Source: National Center for Missing and Exploited Children
know there are resources to help you, and that when you're having an emergency, the voice on the other end of the phone understands and is working to get you help." Hays advises parents in Spokane County to complete a form on the Isaac Foundation website (theisaacfoundation.configio.com) so that temporary caution notes can be placed on their address. Notes that can help create positive interactions between first responder and the lost person include whether the subject is afraid of responders, sirens or lights, and whether the subject will respond to their own name. It's also helpful for responders to know if the person will be combative or cooperative, or how they respond to physical contact with strangers (for example they like or do not like hugs). As someone who's been on the side of first responders and the side of the family during the search for a missing child, Hays feels fortunate that the passions and experience of her personal life can benefit her professional life.

The Isaac Foundation is based and operates in the Spokane County area but does networking and advising across the country. Agencies or counties can contact The Isaac Foundation for advice or support on setting up a similar program in their area.

Information about people on the autism spectrum or with developmental disabilities is critical for telecommunications and responders. Key information from autismspeaks.org includes:

- Nearly half of those with autism wander or bolt from their environment.
- Nearly 28% of 8 year olds with ASD have self-injurious behaviors.
- Drowning remains a leading cause of death for children with autism and account for approximately 90% of deaths associated with wandering or bolting by those age 14 and younger.
- Comorbidity is often seen in people impacted with autism spectrum disorder including epilepsy, ADHD, sleep disorders, depression, anxiety disorders and schizophrenia.

Kelly Conley is Communication & Media Manager, Spokane (Washington) Regional Emergency Communications.

CDE EXAM #65175

1. Many people on the autism spectrum experience sensory issues?
   a. True
   b. False

2. For those on the autism spectrum, how many recognized levels of impact are there?
   a. 2
   b. 3
   c. 4
   d. 5

3. Was Hays’ daughter aware that she was lost when the police found her in the vacant lot?
   a. Yes
   b. No

4. What is the leading cause of death for children with autism spectrum disorder?
   a. Self-injury
   b. Seizures
   c. Drowning
   d. Traffic injuries

5. What percentage of children with autism spectrum disorder wander?
   a. 15%
   b. 25%
   c. 75%
   d. 50%

6. More than one-third of children with autism spectrum disorder cannot communicate their name, address or phone number.
   a. True
   b. False

7. What month has the highest reports of missing children on the autism spectrum?
   a. May
   b. June
   c. September
   d. October

8. A child on the autism spectrum may have a diminished sense of fear.
   a. True
   b. False

9. What foundation did Hays find useful for providing services to families with children on the autism spectrum?
   a. Missing Children Foundation
   b. Evan’s Foundation
   c. Spokane Foundation
   d. Isaac Foundation

10. What does “stimming” mean?
    a. Sensory stimulation
    b. Seeking small spaces
    c. An anxiety disorder
    d. An allergy

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I stepped out of my office into the dispatch area to make a copy of something, and the business line rang. My single telecommunicator was handling another matter, so I didn’t hesitate to pick up the phone.

On the other end, a caller explained that he saw a 2-year-old walking down the street alone and when he returned, she was gone. As I proceeded to get the information, a 9-1-1 call came in, and my coworker picked up the phone. I heard her reiterate, “It was a 2-year-old, but she is OK?”

While our officer was enroute, we discovered that a 2-year-old had left the house on a mission to find mom and dad. In the middle of the night, the toddler’s grandparents had come to watch her as her parents went to the hospital to have her younger sibling. After my caller drove by, another caller saw the same 2-year-old walking down the street, and she stopped, scooped up the child, went to the closest house and knocked on the door. An older gentleman met the knock with a surprised look on his face, and he exclaimed, “How did you get out of the house?” When my coworker dispatched an officer, she explained the situation and wanted a wellbeing check on the child. I could feel myself getting angry, but I couldn’t understand why I felt this way. Even while getting angry at the situation, I didn’t understand why. Why was my reaction so severe?

Awareness of PTSD responses is key to coping with stressors in the ECC.

By Tracy Eldridge
I did not realize at the time that I was triggered. I was feeling unprocessed emotions attached to a tragic call that I had responded to as an EMT seven years earlier. On that call, I was the second field responder on the scene of a 2-year-old who drowned, and CPR was in progress. Once on the scene, I took over CPR and continued enroute to the hospital. Despite our efforts, the child could not be saved. Upon further investigation, we discovered that days before the tragedy the grandparents had watched the child while the parents were away for the night. The grandparents revealed that two days before the drowning, she had figured out how to get out of the house through the sliding glass door. However, the grandparents failed to tell the parents so the parents could seek alternate means of securing the door.

It was only when my officer returned to the station from the recent wandering child call that I realized I had not fully processed the events of the previous call involving a 2-year-old. What happened next was what I consider an out-of-my-mind experience. The officer commented not to tell the parents what happened so the grandparents wouldn’t get in trouble. At that point, the rage came from deep in my soul, and I had an explosive emotional outburst toward the officer. I was “triggered.”

I took a step toward him screaming, “you must tell the parents!” As a telecommunicator, if you have ever told a police officer how to do his job, it does not go over very well. We were in dispatch disputing who was right, and I suddenly cried. To my officer’s bewilderment, he realized whatever was happening was way more profound than what he originally thought. Once I could explain how I felt, we called a truce; we cried together, and he ultimately told the parents.

What does it mean to be triggered? The word trigger gets tossed around a lot, and it is essential to understand that not liking something or the fact that something makes you feel uncomfortable because it reminds you of something you do not like is not the same as being triggered. A trigger is any sound, sight, smell, touch, feeling or object that can recall past experiences — whether positive or negative. Have you ever smelled a familiar smell that brought you back to a happy time or heard a song on the radio that reminds you of the good times you had at a roller-skating rink as a teen? These happy triggers derive from just two senses: smell and sound. Most people welcome triggers of positive experiences; we find it challenging when the trigger is attached to negative experiences. I did not realize at the time that I was triggered. I was feeling unprocessed emotions — likely connected to post-traumatic stress disorder (PTSD) — attached to a tragic call that I had responded to as an EMT seven years earlier.

When a trigger has activated our nervous system and sends us into a fight, flight or freeze response, it may take a bit to return to normal. The fight, flight or freeze response is a human survival mechanism and is considered an acute response by the sympathetic branch of the autonomic nervous system. When our mind perceives a threat, either real or imagined, physical and physiological changes occur in the body. These physical and physiological changes prepare the body to either fight a predator, run from the predator, or freeze and play dead so the predator moves on. As telecommunicators, many fear-based reactions do not come with physical activity. Instead, they are mental and emotional.

**Signs to look for when we have entered the fight, flight or freeze response include:**
- Increased heart rate including feeling your heart race or hearing it beat in your ears
- Increased blood pressure, which can result in a flushed face or headache
- Respiratory rate increases causing vessels in the lungs to dilate and short, rapid breaths that can lead to numbness
- Gastrointestinal issues such as nausea and stomach pains and constipation
- Dry mouth
- Pupils dilate allowing in more light to see clearer
- Hearing is heightened

Awareness of physical and physiological responses during a shift in the emergency communications center (ECC) can help identify unresolved critical incident stress or trauma related to a previous call or event. While we are getting better at recognizing acute symptoms of stress, we still have a long way to go. We must smash the stigma of the “suck it up mentality,” or fearing repercussions if you speak up about feelings after a perceived horrible incident. The word perceived is valuable as not all calls carry the same weight or trigger negative emotions for each person. A call that involves an animal may have a higher stress response in someone than an armed robbery. We should not judge the intensity of feeling that a call evokes in others because it may not bother us personally.

There are obvious and not-so-obvious triggers in the ECC. An obvious trigger may be someone screaming, sirens or calls such as suicidal caller, domestic violence, child abuse, animal cruelty, mass casualty incident or natural disaster. Less than obvious triggers might include a caller hanging up, the smell of hot apple cider or a 2-year-old walking down the street. Let me explain why “being hung up on” and a “hot apple cider” warrant a trigger.

The tone went off for an elderly man, unconscious and not breathing. The telecommunicator dispatched the ambulance as usual; the ambulance transported the patient and that was that. The call taker met her supervisor at the office door the following day, disheveled and distressed. She shared with her supervisor that the call she received the night before “messed her up.”

Confused, the supervisor asked, “was it the elderly male call?” She replied, “Yes, and I have no idea why. I could not sleep, and I cannot stop crying.” “Interesting,” the supervisor says. “That does not seem like a call that would mess someone up!”

As the two of them reviewed the call, it was clear that it was not the call itself that was the problem; it was the fact that the caller hung up on the call taker. Her feelings recalled the ones she had felt eight years earlier. In addition to myself, this call taker received the 9-1-1 call about the 2-year-old who died tragically. During that call, the grandmother who called for help hung up on the call taker, the same way the wife of the elderly man did the night before. It was a not-so-obvious trigger that became clear upon further inspection.

As for the hot apple cider, this one also made sense once the layers were peeled off. In the fall, the call taker picked up a hot apple
cider from her local coffee shop on her way to work. When she sat at the console, she took the cover off to let her hot cider cool off. One day, as soon as she took the lid off and found peace in the aroma, she took the worst call of her career. She never said what the call was; she did not have to. She realized why she could no longer drink her favorite fall drink. When she tried it, the smell and taste of it were garbage. Her brain was actively protecting her.

A form of therapy widely and successfully used in treating PTSD — and its associated triggers — is eye movement desensitization reprocessing (EMDR). EMDR uses external stimuli, such as moving an object like a pen or finger light back and forth in front of your eyes, hand tapping or vibration, or audible tones that alternate in each ear.

When EMDR therapy is used to access traumatic memories, the memories become manageable and less intrusive. The emotional charge that often accompanies the event becomes disconnected from the previous trigger. EMDR assists emotion to be separated from the event, and that connection between the trigger and the emotion is no longer as intense if it remains at all.

The goal of this brief overview of PTSD triggers is to raise awareness about how public safety telecommunicators react to professional stressors. Ignorance of these triggers can lead to an official PTSD diagnosis, broken relationships, self-harm or worse. If you find yourself reacting physically or physiologically to triggers, it may be time to get a checkup from the neck up. Stay safe, stay strong and stay here; we need you.

Tracy Eldridge has spent 25 years in public safety, 20 in the emergency communications center, and four years at RapidSOS. She has now launched her own training and consulting company and podcast, On Scene First, which focuses on educating public safety professionals on must-have technology tools, leadership skills and mental health resources to “save lives on both sides of the call.”

### CDE EXAM #65176

1. EMDR stands for:
   a. Eye movement desensitization reprocessing
   b. Eye mitigation desensitization reprocessing
   c. Eye moving desensitization reprocessing
   d. Eye movement desensitization repurposing

2. All triggers are obvious.
   a. True
   b. False

3. A happy trigger may be sight and sound and is usually a welcomed event.
   a. True
   b. False

4. Based on the article, which is not an indication that you are having a fight, flight or freeze response:
   a. Breathing faster
   b. Increased heart rate
   c. Upset stomach
   d. Hearing loss

5. Dry mouth is an indication of a stress response.
   a. True
   b. False

6. Awareness of physical and physiological responses during a shift is not essential; as long as you recognize it in the first month you will be ok.
   a. True
   b. False

7. Short rapid breaths do not cause numbness; increase of heart rate does.
   a. True
   b. False

8. EMDR treats PTSD by:
   a. Creating an exercise program
   b. Prescribing powerful tranquilizers
   c. Using external stimuli, such as moving an object like a pen or finger light back and forth in front of your eyes
   d. Laying down dietary guidelines

9. Physical and physiological changes prepare the body to either fight a predator, run from the predator, or freeze and play dead.
   a. True
   b. False

10. Feeling unprocessed emotions attached to a tragic call can be a trigger.
    a. True
    b. False

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AFC is a division of APCO International—a non-profit organization dedicated to serving those in emergency communications.
Headset Heroes: Who’s Your Sidekick or Super Team?

Most superheroes don’t have to go it alone. Some have a sidekick. Batman and Robin. The Lone Ranger and Tonto. Snoopy and Woodstock.

Or maybe they are part of a super team like the Fantastic Four, Avengers or Ninja Turtles.

Fortunately, most public safety telecommunicators don’t have to go it alone either, and this year for NPSTW, we want to know who is your sidekick or on your super team.

Is there someone who always has your back on the tough calls? Or maybe someone who can make you laugh on the longest days?

Do you have a Radar O’Reilly type who always knows what’s coming and what you need before you do?

Or maybe your shift works like magic to save lives and protect first responders. Does your team go out of their way to support each other when someone is going through a tough time?

The partner to your hero could even be a friend or family member outside the ECC who can help you decompress and enjoy that side of your life.

Sidekicks and super teams are the, well, meat and potatoes of a job like yours that requires fast thinking, deep knowledge and calm compassion. Let us know who it is you’d scale walls with and you might win $100 to treat your center (and your loyal sidekick).

A few rules.
- There will be two $100 prizes, one for smaller (1-35 employees) and one for larger (over 35 employees) ECCs.
- Sending a photo adds one “like” to your score.
- Be creative, but please don’t attach copyrighted materials as we will not be able to post them.
- Read the rest of the rules on the npstw.org website.

Submit your entries at npstw.org/sidekicks and vote for your favorites by liking them at npstw.org/superteams. The deadline for both is 9 a.m. on April 16.

Pages From the Past

The description of a public safety telecommunicator has progressed over the years, and old issues of PSC magazine are a good place to observe that progress. The October 1980 cover of the Journal of Public-Safety Communications, PSC magazine’s predecessor, is devoted to the virtues — at times swerving into rhyming verse — of the telecommunicator.

“Despite having to be part police officer, part firefighter and knowing emergency medical aid, they are able to console the distraught until help arrives, and to coordinate all this in a matter of seconds. The telecommunicator is a real unknown hero,” writes Ed Dow, director, RI COMM, Rock Island, Illinois.

There is much familiar in “What is a Telecommunicator?” including calm under pressure and summoning emergency services while typing vital caller information into computer terminals. But the omissions from this 20th century paean are also revealing. Telecommunicators are not described as emergency services’ first, first responders who provide life-saving aid directly to emergency scenes. The fact that such responsibilities would be included in any contemporary description points to the growing skill and professionalization of the telecommunicator in the 21st century.

AD Index

<table>
<thead>
<tr>
<th>Company</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADCOMM Engineering LLC</td>
<td>28</td>
</tr>
<tr>
<td><a href="https://www.adcommeng.com">https://www.adcommeng.com</a></td>
<td></td>
</tr>
<tr>
<td>Altairis Technology Partners</td>
<td>28</td>
</tr>
<tr>
<td>altairisllc.com</td>
<td></td>
</tr>
<tr>
<td>CTA Consultants, LLC</td>
<td>28</td>
</tr>
<tr>
<td><a href="https://www.cta-c.com">https://www.cta-c.com</a></td>
<td></td>
</tr>
<tr>
<td>Lumen</td>
<td></td>
</tr>
<tr>
<td>lumen.com/publicsafety</td>
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<td>OnStar</td>
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<tr>
<td>public-safety.onstar.com</td>
<td></td>
</tr>
<tr>
<td>Penguin Management, Inc. / eDispatches</td>
<td>18</td>
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