

MINUTES

Mental Health of First Responders



Representative Rhonda Milstead, Chair
Representative Ryan Cwach, Vice Chair

**First Meeting, 2020 Interim
Thursday, August 20, 2020**

**Room 414 – State Capitol
Pierre, South Dakota**

The first meeting of the Mental Health of First Responders Task Force was called to order by Representative Rhonda Milstead, Chair, at 1:00 PM on August 20, 2020, in Room 414 of the State Capitol, Pierre, South Dakota. A quorum was determined with the following members answering roll call: Representatives Doug Barthel (remote), Ryan Cwach (Vice Chair), Rhonda Milstead (Chair), Tina Mulally, Tamara St. John (remote), and Larry Zikmund; Senator V.J. Smith (remote); and public members Roger Belisle, Nick Carlson, Connie Johnson, Anne Kelly, Maynard Konechne, Tom Ward, and Brad Wilson. Excused: Senator Troy Heinert.

Staff members present included Alex Timperley, Legislative Attorney; Anna Madsen, Research Analyst; and Cindy Tryon, Senior Legislative Secretary.

NOTE: For purpose of continuity, the following minutes are not necessarily in chronological order. Also, all referenced documents distributed at the meeting are attached to the original minutes on file in the Legislative Research Council office. This meeting was webcast live. The archived webcast is available at the LRC website at sdlegislature.gov.

Opening Remarks

Representative Milstead thanked the members for taking the time to serve on this task force. The task force will be valuable to those who serve as first responders as well as to legislators by assisting them in finding ways to address these issues.

Representative Mulally read HCR 6023, *A CONCURRENT RESOLUTION, to encourage the Executive Board of the Legislature to create an interim legislative study to address the mental health of first responders.* ([Document #1](#))

Diagnosing and Defining the Problem

Representative Milstead invited several first responders and caregivers to give testimony regarding diagnosing and defining the mental health issues affecting first responders. The participants were given the option to testify remotely or in person.

Mr. John Potter, Firefighter Paramedic, Rapid City Fire Department, (remote participation) shared his story. Mr. Potter is starting his ninth year with the Rapid City Fire Department. He is married and has two young children. Mr. Potter said he knew the stresses of the job when signing up. In fact he was asked about how he handles stress during the interview process. Mr. Potter continued, saying during the first eight years with the department the lingering events were just there in the back of his mind. Last September he noticed he was suffering a different type of stress. He was no longer able to destress as he had in the past. Things continued getting worse. One symptom he suffered was grinding his teeth to the extreme that he actually chipped some of his teeth. Other symptoms included night sweats and irritability. Mr. Potter reached out to his superiors and they directed him to counseling. The first counseling program he selected was not covered by his insurance. Insurance suggested another counseling program, but the symptoms continued to worsen, suffering several nights in a row without sleep. Eventually the depression was so bad Mr. Potter considered taking his own life. Mr. Potter said as a leader he did not believe he was performing adequately. He was not clear headed and felt like he was a burden on his department every time

he called in sick. When he could not keep all of this hidden any longer he was put in contact with Dr. Belisle, the city psychologist for Rapid City. After working with Dr. Belisle, Mr. Potter finally feels like he is being helped.

Mr. Potter said there are a lot of first responders who do not have the same support first responders in Rapid City have. He has made it his goal in life to make sure people are aware of this issue and make sure workers know they can get help. Mr. Potter said he worries about the people who are not able to find an avenue to get help. The injuries are substantial and take time to heal. Mr. Potter thanked the task force members and said what this committee is doing is very important.

Ms. Jerry Webber, Clinical Social Worker, Yankton, (remote participation) said she has been married to a paramedic for 33 years and she has been a clinical social worker for 11 years. Ms. Webber said her office provides support for first responders from throughout the area, helping them cope with the horrible events with which they have to deal. Ms. Webber gave an example of a horrific event which occurred on the Fourth of July several years ago, and the first responders still talk about what they faced that night and into the next day. First responders are exposed to trauma and experience lifelong reactions. First responders are expected to repress their feelings, be professional and unemotional when responding to calls. They do not talk to their life-partners about these events as they want to protect them. Ms. Webber said first responders often do not trust mental health providers and she has spent many years building trust with area workers. It is important to find ways to make sure the first responders have the help and support they need and deserve. They will face a lifetime of suffering while continuing to be active members in our communities.

Mr. Rod Veldhuizen, Chaplain, Custer Volunteer Fire Department, (remote participation) said he was with the Yankton Fire Department for 12 years just prior to moving to Custer, where he is the Chaplain for the Custer Volunteer Fire Department and a licensed marriage therapist. The statistics on firefighter suicides are incredible. A survey was conducted at Florida State in 2015 and found 46.8% of firefighters had suffered suicidal thoughts with 19% having plans for death by suicide. There is no relief from the duties as volunteer firefighters are always on call, even while resting. The events the first responders are called to are becoming more and more disturbing. There is a stigma for first responders seeking out help from mental health providers, as well as an extreme shortage of mental health providers who understand firefighters. Help is not available in every part of the state. PTSD usually follows fatigue and dispassion for what the worker is doing. These workers need to be reached before they get to the PTSD diagnosis. Mr. Veldhuizen added that he was at the horrific event near Yankton discussed by Ms. Webber and the images of what happened continue to haunt him.

Ms. Tami Haug-Davis, Director, Key Solutions EAP, Sioux Falls, (remote participation) said she is an Employee Assistance Provider (EAP) and a part of the only true EAP organization in the state. Key Solutions works directly with the fire and police departments being responsible for the mental health of Sioux Falls' first responders. South Dakota has a critical lack of accessibility and availability of these types of services. Most of the smaller communities do not have free counseling services available. South Dakota needs more qualified mental health providers trained in trauma response. The counselors need to be available when the first responders first start experiencing symptoms. Ms. Haug-Davis said she appreciates the task force taking more of a statewide look at what is needed in South Dakota. It is time to look at creating a system that gives first responders access to resources. There is nothing better than being able to reach out to those who save lives.

Mr. Jerome Harvey, Pennington County Fire Administrator, Rapid City, said he has been involved with firefighting in some capacity since 1979. Currently he is the Pennington County Fire Administrator working with 550 volunteer firefighters covering 5,000 square miles. The fact that first responders are affected by PTSD affects the ability to recruit and retain members. The mental health issues faced by first responders is something the departments can no longer deal with by themselves. First responders have a culture of not telling our story very well. Mr. Harvey said that when the first responders came to the Legislature asking for help with having workers' compensation cover some of the expenses for mental health care, the insurance companies had an uprising and the lobbyists worked

hard to fight any such legislation. First responders in South Dakota started talking about this issue in the mid-80s. The long game for helping the workers is not good. The problem is very real, and first responders need the help of the Legislature to solve this problem. Mr. Harvey asked the task force members to move forward with addressing this issue.

Mr. Casey Warren, Fire Prevention Technician, SD Department of Ag, Rapid City, said he rose up through the ranks of volunteer first responders mostly through the Rapid City volunteer fire department. In 2012 Mr. Warren was diagnosed with MS and retired in 2013. He was able to return to work part time in 2017. Mr. Warren talked about men he worked with over the years who committed suicide, saying that the demons won in the end. Mr. Warren said his wife has pointed out that she can tell there are still issues caused by his past work. Now that Mr. Warren is retired he does not have access to the same services available to him when he was working full time. First responders do not like to ask for help for themselves, and it is difficult to find someone who understands the language. Mr. Warren is the coordinator for LAST, Local Assistance State Team, which helps fire departments at their very worst times. The group assists with line of duty deaths. Mr. Warren said he worries about what type of mental health assistance these workers can get whether it be tomorrow, next week, next year, or ten years down the road. Mr. Warren asked the task force members to work on finding a process to help with these issues and to be sure to remember the first responders working in the smaller communities.

Mr. Mike Milstead, Minnehaha County Sheriff, Sioux Falls, talked about the loss of first responders to suicide who were friends and coworkers; police officers and firefighters struggle in that particular area. Sheriff Milstead asked the task force members to think outside the box when looking for ways to address these issues. Sioux Falls does have services available to first responders including active EAP programs and peer support groups. The task force has important work in front of them. There are great things going on in rural South Dakota right now with the Helmsley Foundation and telehealth; there are many opportunities.

Mr. Jeff Siscoe, Martin Fire Department, Bennett County, has served as a volunteer firefighter for 33 years. He said Martin is a small community with a population of about 3,300 people. The fire department receives 100-150 calls a year. It is very easy to have an emotional connection when called to a car accident because the first responders know everyone in the area. Small town first responders have a fear of being called to an accident and finding it is one of their own children. Mr. Siscoe said his wife talks to him about which incidents hit him harder than others; she can tell. The department has had people back away from the job for a while because of events they have responded to. Some members of the department have cumulative issues with PTSD, meaning they had mental health issues years earlier and those issues were reactivated through more recent events. The department uses the critical incidents team out of Rapid City for support. The members also talk to each other; seasoned firefighters ask the rookies questions, (such as are they sleeping, are they eating) with the hope of recognizing these issues. It is difficult when mental health issues develop, and the department is unable to help. There is no insurance and the small fire departments do not have much money. This means the cost for professional help falls on the individual. Mr. Siscoe said he hopes this task force will be able to do something that will help fix this problem. The first responders from throughout the state will do everything they can to be of assistance to the task force. In the fire service, members are like brothers and sisters; they watch out for each other.

Representative Milstead opened the meeting to questions from the task force members.

Dr. Anne Kelly asked Mr. Potter about the obstacles he encountered when reaching out for help.

Mr. Potter said he started reaching out for help at an in-house level talking to the people where he works. Upon realizing the problems were beyond the peer level, he was one of the first to work with the city psychologist, and that work is just getting started. One of the obstacles he encountered was the fear of repercussions for taking time off. Everyone in the department works very hard and Mr. Potter did not want to put his burden on someone else because he could not be at work. Although he did receive the time off he needed, he was always fearful of letting

his co-workers down. Another obstacle is always the financial concerns. Copays and going to numerous doctors did put a financial strain on his family. Mr. Potter said he is lucky now to be able to work with Dr. Belisle, the city psychologist. Dr. Belisle was not an option a few years ago.

Representative Zikmund asked Mr. Harvey about his comments regarding lobbyists giving him a difficult time when he testified in committee during session. Mr. Harvey said there were many people who came to the committee meeting and spoke against allowing mental health treatment for first responders to be covered through workers' compensation. Mr. Harvey said this reaction was shocking to him and his colleagues. The opponents spoke as if this is not a serious issue. This is a very serious issue and there are no long term ways to address it. First responders need legislative help with this.

Mr. Ward asked Mr. Harvey if anyone has considered the costs involved by not treating these issues. Mr. Harvey replied not addressing this issue is costing the state right now. Local volunteer first responders are no longer able to cope with these issues. The local fire departments are constantly having fundraisers to try to fund their needs. The question is do we want first responders to be able to do their jobs or be fundraisers. People are more likely now to choose not to be a volunteer first responder because of the mental health issues and the long term effects.

Dr. Belisle said there is ample evidence to prove the extent of the problems with PTSD for first responders and asked for comments on the scope of other mental health issues these workers face.

Ms. Webber said some of the other mental health issues include depression and marital problems including the first responders wanting to hide things from their marital partners because they think talking about the problems makes them look weak.

Ms. Haug-Davis said family problems are a big issue. Other diagnoses include anxiety, stress, and depression. First responders go through trauma frequently so are not given the time to bounce back, there is a cumulative nature of these events. Alcoholism and other addictions are more common, and all of these things affect the family financially.

Mr. Potter said the divorce rate for first responders is very high. He said his wife is a saint but there is an issue with social distancing because of these traumatic events.

Mr. Veldhuizen said his wife never knows when he is going to fly off the handle. With the male population it is not okay to have a mental health issue, so we tend to react with anger.

Dr. Belisle said with proper care trauma can be mitigated on the front end to help minimize the long term effects.

Ms. Johnson asked Mr. Siscoe if the task force were able to find some options for first responders, would more workers be apt to seek help? Mr. Siscoe said there is a stigma regarding finding help for mental health issues, but if the care was covered by workers' compensation it would be a lot easier to get first responders to seek help. The financial part of receiving care does create problems and it would help if that obstacle were to be put out of the way, and a fellow firefighter could better encourage someone to get help.

In response to questions from Mr. Konechne, Mr. Siscoe said the first responders in his area have to travel at least an hour to find a mental health care provider who understands treating PTSD. Having the option to use telehealth technology to obtain these services would be a big help in getting treatment.

In response to several questions from task force members, Sheriff Milstead explained there is not a statewide policy regarding assisting first responders in dealing with the things they see in this line of work. Individual departments have their own policies and many departments are so small they do not have a lot of resources to help them. In Minnehaha County there are stress debriefings and officers are assigned to different types of crimes for which they

have received specialized training. Those types of policies do not work in the rural areas. The idea of a first responder being able to meet with a peer support group and follow that up with clinical care would be great. The clinical care could be offered through telehealth. Sheriff Milstead said PTSD may not be a bigger problem now than in the past but there is more recognition of it; PTSD was not understood until recently. Violence against police officers right now does cause additional stress and officers do wonder about the level of support they have.

Representative Mulally asked if volunteer first responders have access to workers' compensation. Mr. Wilson explained there is no state statute allowing for workers' compensation to cover costs for mental health care. Workers' compensation coverage is decided by the state legislature.

Dr. Belisle said Rapid City law enforcement and fire fighters have a list of care options available to them for their long term mental health care. Dr. Belisle asked Mr. Harvey what the volunteers do for more critical care. Mr. Harvey said the need for long term care is a real problem. The departments work to try and get professional help for the volunteers when needed, but there is no long game out there as far as mental health care for volunteer first responders. Dr. Belisle said Rapid City sends their professional first responders out of state for long term care if there are no local resources available. This type of care includes treatment for chronic or severe PTSD as well as drug or alcohol problems. Mr. Harvey said there is no funding available for these types of services for the volunteer departments.

Representative Cwach asked why people respond differently to trauma.

Dr. Belisle said the answer to that question could be an interesting and long discussion. A situation influences an individual but does not determine the reaction. What a person does with the impact is a key factor. One person may repress something that another does not, and that repression could be a factor to the response. There are internal and external variables.

Dr. Kelly added there are shared environments and personalities within similar lines of work. Treatment models can be tailored based on these different groups and their similarities.

Mr. Konechne said trauma may not be an issue at the first event, but repetition of events causes the impact to build creating different reactions.

In response to a question from the Chair, Dr. Belisle explained co-occurring disorders as disorders that happen simultaneously. When this occurs, sometimes the disorders can be treated simultaneously but some disorders need to be treated consecutively.

Ms. Johnson said as a veteran she first reached out to a peer group for help. The peer group recommended she also receive clinical help but she discovered after four sessions the clinical option was not for her. Ms. Johnson said she continues with the peer group finding it easier to talk to someone who has had the same experiences.

Mr. Ward said most first responders do not suffer with PTSD and those who do often will not seek treatment. People can be treated for PTSD often very successfully. But forcing someone to get help who does not want help can cause more damage than do good. Most people prefer talking to a peer who understands what they have gone through. Mr. Ward added these systems do work as long as they are available.

Mr. Siscoe said whether or not one of our first responders seeks professional help is up to them. The first responders cannot be forced to seek help as they are volunteers. Until the individual is ready this is all very difficult.

Task Force Discussion

Representative Milstead opened the meeting to task force discussion asking the members to stick to the agenda.

Mr. Carlson said there is a long term affect that needs to be considered. There are many suicides within this workforce after retirement. While an active first responder, things can be stuffed down but retirement forces people to deal with the feelings and the person is no longer involved with peers to talk to on a daily basis. This task force needs to be looking at the short and long term mental health care for first responders.

Dr. Belisle said many people's mental health buckets are full and they may need help to drain the bucket to make it easier to deal with things when the work is done.

Mr. Carlson said first responders want to keep doing what they do and are afraid if they admit to having problems they will lose their job. Rapid City has made great strides in the past two years since hiring Dr. Belisle as the city psychologist. First responders there now know they will not lose their jobs because they need help. First responders need reassurance and that is okay.

The next meeting of the Mental Health of First Responders Task Force will be September 17, 2020.

Adjourn

Representative Mulally moved, seconded by Mr. Konechne, that the Mental Health of First Responders Task Force be adjourned. The motion prevailed on a voice vote.

The task force adjourned at 3:40 p.m.