Town of Northumberland  
JLMC Committee  
Draft Meeting Minutes  
Dates: Thursday, May 28th, 2020  
Place: Town Office – 19 Main Street  
Time: 12:30 to 1:00 P.M.

JLMC members present: Jim Gibson, Sam Oakes, Robin Irving, Elaine Gray  
Others present: Aaron Gibson EMD, Melinda Kennett, Becky Craggy  

Craggy opened the meeting at 12:31 pm

- **Acceptance of 12/19/19 meeting minutes:** Motion by Gray, second by Kennett, motion carried to approve minutes as written

- **Discussion of appointment of new terms for committee members:** Craggy asked if anyone would like to recommend someone, continue in the same capacity or switch representative status? Some members were not present.

- Craggy asked for a motion, motion made by Jim Gibson, seconded by Aaron Gibson to have following representatives for the ensuing two year terms.

- **Management Rep Members:**
  - Glenn Cassady – Public Works (March 31, 2022)
  - Jim Gibson – Public Safety (March 31, 2022)
  - Robin Irving – Office Administration (March 31, 2022)

- **Employee Rep Members:**
  - Paul Perras – Public Works (March 31, 2022)
  - Samuel Oakes – Public Safety (March 31, 2022)
  - Elaine Gray – Office Administration (March 31, 2022)

- Craggy mentioned anyone that wanted the position as Safety Process Coordinator was welcome, no one committed. This position has an open ended term and is by appointment by the Board of Selectmen

- Chief Pelletier was not able to be at the meeting, but did submit an email to be read, which is attached to these minutes. The Chief also offered to attend the meeting by phone or have anyone call that may have questions. The email addressed a medical call the Chief was on the night before here in Town and sited many problems, issues and mistakes that were made in the handling and communication on this call between


dispatch and the responders on scene. It was a possible COVID situation. Based on the call, the Chief proposed as mitigation the following:

- 1. Responders must use the PPE
- 2. Better communication as a team
- 3. Need facilities to be able to decontaminate personnel and equipment
- 4. Develop policies to ensure the above is adhered to
- Much discussion ensued after reviewing the email which lead right into the next bulleted item on the agenda

- **Discussion of COVID protocol and safety for employees** – The members present agreed there needs to be remedies long term for better communication and facilities that can accommodate changing societal needs. Possible locations in town were discussed. There was discussion about what other communities were doing at this time to mitigate exposure.

- Some immediate items noted by the committee upon possible future opening of the office were; one direction traffic, remote access put in place, maybe a bench outside, hand sanitizer, masks for people who enter building.

- Being no further business to discuss, Craggy asked for a motion to adjourn, motion by A Gibson, seconded by Irving, motion carried

- **Adjournment at 1:20 pm**

- No future meeting date was set at this time

***This institution is an equal opportunity provider, and employer.***
COVID hoax exposure

1 message

Peter Pelletier <p.pelletier@northumberlandnhpd.org> Thu, May 28, 2020 at 12:07 PM
To: Becky Craggy <b.craggy@northumberlandnh.org>

Hi.

Circumstances:

Last night, I attended a medical call at Melcher Court. On arrival, I met the person who had called for the ambulance and kept them company while we waited for EMS to arrive. I notified my dispatch to advise EMS dispatch I was outside with the person awaiting EMS. After waiting outside with three trillion mosquitoes for a long period of time, the person asked if we could sit in the cruiser to avoid being completely drained of blood. I agreed. It was a helluva idea.

As we sat in the car, the person became very sad, telling me the cat they have is sick with COVID. Immediately, I remembered a headline about a tiger in the Bronx Zoo and some other animals around the country and the world which have been tested for and shown to be carrying COVID. The person began boohooing while wondering what life would be like without that cat.

Meanwhile, I was wondering how it could happen that COVID was never mentioned in the medical call I heard on the radio, since dispatchers are currently instructed to ask about COVID and flu symptoms and then notify respondents. I got out of the car, called the other officer on duty, and asked him to bring some decontamination supplies and a mask to me.

EMS arrived and I went to the ambulance to warn them. They responded they already knew, and it appears they thought I knew too, which explains why they asked me why I wasn’t wearing PPE. My officer arrived and sprayed me down with a disinfectant spray while I wiped my exposed skin with disinfectant wipes. I then gloved and masked up and we deconned the cruiser. The person had since been removed to the ambulance.

I went to Weeks Hospital and after a period of time, it was confirmed by the Littleton veterinary hospital that while many animals do carry corona viruses, it is also nearly unheard of for the virus to cross species lines. More information surfaced: the person who had called the ambulance has psych issues and claimed to have administered a "home COVID test" to the cat, which indicated positive, causing the ruckus to begin with. It was all a hoax.

Having been cleared from an actual exposure, I have to note a few things that might have prevented the possibility of this to begin with.

Issues, mistakes, problems:

First, I was on a medical call without PPE. We do carry masks in the cruisers, but they are paper or cloth, neither of which is effective in containing the spread of COVID. Using paper or cloth to protect against something as tiny as a virus is like using chain link or chicken wire to keep out mosquitos. It's nothing more than a placebo, although it will contain the cough and spray of an infected person. We do have N-95 masks. I keep mine at my desk, in case I have to go to a real COVID call, or if things get bad out there. This is a mistake. It's like keeping my ballistic vest in the station until I need it. If I need it and don't have it, there's no time to get it.

Second, we all need to communicate better. EMS knew, which is why the response was so delayed. The worst part of the delay is I was with the person for quite a long time, maybe up to fifteen minutes, and we didn't sit in the cruiser until about twelve minutes into this. My dispatch had notified Weeks dispatch I was there. Nobody reached out to me with the COVID code. I'm not upset with our EMS crew. I was there because I knew this person has psych issues and can be a problem, so I was there to "guardian angel" my EMT's, whom I cherish. Anybody can forget or overlook something, particularly when we think the other guy knows the same thing we know. But, it turned out different last night because assumptions were made. No fault attaches to EMS, in my opinion. It's something that happens, and I just want us all to communicate better. Chief Gibson and I have already met this morning and we have recommitted to sharing information. Again, I'm not blaming EMS.

Third, Weeks dispatch knew about the COVID information and informed EMS by phone, instead of using the radio code, but when my dispatch informed them I was on scene, they did not tell my dispatch anything. My dispatch didn't know about it, and when Weeks dispatch had the chance to say something, they did NOT. As opposed to the paragraph above,
I am furious with Weeks and have been in communication with someone there in this regard. PPE aside, Weeks has a duty to inform responders and they failed miserably.

Fourth, believing at first I had been exposed, and knowing I would have to quarantine for fourteen days, I put Officer Matson in charge after notifying Michelle Randall about the change in our operations. This would have been what we could do administratively, but what about really deconning the cruiser? We have no closed place to do that work, and it’s not advisable to simply let it air out. EMS had their own battle to wage by spraying and wiping down the interior of the ambulance. We need a building to house and decontaminate our vehicles, keep them out of the elements, and keep them safe from accidents and vandalism.

**Mitigation:**

We need to use our PPE. We need to communicate better as a team. We need a building with facilities to decontaminate personnel. Had I actually been exposed, I would have needed to shed my uniform and all my clothing somewhere other than the parking lot of the PD, bag it all for decon on site rather than at home, shower and wash up, then get dressed in either a new uniform or street clothes in an uncontaminated zone. Then we would have to decon the contaminated zone. It doesn’t matter what the actual contamination is. It could be a virus, a harmful bacteria like MRSA, or some kind of hazardous material. We (and our EMS siblings) have no facilities to get that job done, and it is not safe or satisfactory. Mitigation measures for this kind of incident include a coherent policy for PPE and inter-agency communication, a legitimate facility that can house vehicles, personnel, and equipment, along with having a decontamination capability that is credible for all those assets, including on-site laundry and hygienic facilities.

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*When the legends die, the dreams end. There is no more greatness.*

*Tecumseh*