



Staff photos by E.J. Harris

It can take up to five dispatchers to work on a busy swing shift when calls for service are at their highest for the day.

# DISPATCH: Job can take its toll

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“The first is mostly observation,” he said. “Learning the codes, really just getting familiar with the flow of information.” New dispatchers will have a headset that’s linked to that of a senior employee, and can listen to that person take calls.

From there, Russell said, they learn how to take calls on the non-emergency line and document and enter information. Then they move on to emergency calls, and finally combine all those tasks.

“The most challenging thing is honestly finding time to (train) while still working as a dispatcher,” Russell said. “Trying to train someone to connect the dots that you already see.”

Each dispatcher sits at a desk with seven screens: two connected to the phone lines, three where they enter and access information from various databases, and two that access the radio system. There are usually five or six working at a time, with each person managing a different agency. One person will take care of all emergency and fire agencies, and one dispatcher will be assigned to each police agency. As they receive information about a call, they enter it into the system, where the other dispatchers can view it.

“Even if I’m not covering Umatilla, I can still see their information, because I might interact with them at some point,” Russell said.



A light tower tells other dispatchers and managers whether a dispatcher is on a call or talking over the radio.

After some in-office training, dispatchers will go to a two-week academy, where they’ll learn more call taking, as well as how to dispatch certain emergency situations. They must learn how to instruct people in CPR over the phone, as well as help deliver babies.

Communications officers also get training for how to give courtroom testimony, as they may be called in for a domestic violence case or a shooting they dispatched.

Some of the more technical aspects of the job, Russell said, come from rote memorization and experience. Dispatchers work with several different databases, such as Law Enforcement Data System. The statewide database can access information about wanted people, stolen vehicles and driver history. As an officer pulls someone over, dispatchers will get to work, pulling up the information

for that vehicle, and let the officer know any relevant information. They also have access to a national system, NCIC, where they can check for warrants and other information.

Dispatchers also have to familiarize themselves with the county map — even if they’ve never been to the area, they may have to direct an officer around it.

“I’m not from here, so that was hard for me,” Slette said. “People will say, ‘I’m on this street,’ and I won’t even know what city.”

They communicate with officers using “10 codes.” Common ones include 10-4 — copy — as well as several traffic codes. The code for a mental subject is 10-96, and for a domestic problem, 10-16. For an intoxicated driver, it’s 10-55.

Some things can’t be taught in training, Slette said. “You still have to work to

build the trust of the people in the room with you,” she said. “You get those calls where it takes a little longer to click in, like CPR or when an officer’s been injured. That’s terrifying.”

Dispatcher Kevin Dunham said he continues to get calls he’d never expect.

“I still get surprised when I get a 911 call, and they’re wanting the phone number for a restaurant,” he said.

Many dispatchers say the emotional strain is often overlooked. Though they’re not on the scene of an incident, they’re the first ones to hear about it.

“When I went to my first training to be a dispatcher, they opened up with, ‘You will last in this job five years,’” said Dunham. Though he’s now in his 18th year, Dunham admitted it can take its toll.

“We’re service-oriented people, and someone is truly in need of help,” he said. “If we can talk someone down from considering suicide. A lot of times we’re not successful, but a lot of times we are.”

Communications Sergeant Karen Primmer said one of the toughest parts of the job is the lack of closure — once law enforcement takes over, dispatchers are no longer a part of the call, and don’t know whether something was resolved.

“We sometimes get left out of that conclusion piece,” she said. “We want to hear the rest of the story.”

# BROWN: Republicans urged governor to veto the bill

Continued from 1A

raise \$244 million in the current two-year budget cycle, which concludes in mid-2019.

Many Republicans in the Legislature and some members of the business community had been vocal about their opposition to

the bill and called on the governor to veto it.

In a press conference Friday, Brown noted that those business owners already receive special rates from the state and will be able to use the deductions on their federal returns. Brown said signing the bill “prevents a third tax break at the expense

of our schools, our children and our seniors.”

Senate Republican Leader Jackie Winters, of Salem, disagreed, saying in a statement after Friday’s announcement that “the right thing to do would be to veto this partisan tax increase on small business.”

“Start-ups, mom and pop

shops, and young entrepreneurs are doing great things for Oregon, but the majority party insists on passing an unfair tax increase that will stifle their growth, and harm the very Oregonians we should be helping,” Winters said. “There is no budgetary need to raise taxes on small businesses.”

# NURSE: Work begins Monday

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student health screenings, which former President Bill Clinton announced Tuesday.

The federation is the second largest nurses union in the nation and an affiliate of the Oregon Nurses Association. Federation spokesperson Andrew Feldman said the U.S. Virgin Islands are “still a mess” with widespread ruin in once-vibrant communities. Some areas, he stated, resemble the aftermath Hurricane Maria left in Puerto Rico.

The federation in October sent 40 nurses there. Feldman said they helped in an array of medical situations, from people suffering mental health issues to citizens stuck in homes and coping with diabetes or high blood pressure.

“They were there for three weeks and really had a huge impact,” he said.

This time the federation will land 10 nurses on the island of St. Croix to assess the general health of 5,000 children, while Cline and 11 more nurses go to the island of St. Thomas to provide check-ups on 7,000 children. A nurse from Bend and another from Medford are making the journey. The group returns home next Saturday, giving them five days to complete the work.

“Our goal is we’re going to get every child seen,” Cline said. “I’d hate to be that nurse that misses the one kid.”

The Oregon Nurses Association in its March 9 newsletter told its members the American Federation of Teachers was looking for volunteers for the effort. Cline, a nurse of 19 years with 18 at the hospital, said she has never done a medical mission. She and her husband, Bill, a cattle rancher, have three grown children, none at home. Helping children is core to who she is, Cline said, so she asked her husband what he thought of her going.

“He said I just have to do it,” she recalled.

In addition to the student screenings, the nurses will check the schools for health risks, such as asbestos exposure or the spread of dangerous mold.

“These schools have been open all this time, and

no one knows the condition of these schools,” Feldman said.

“We’re just kind of the first eyes on the ground,” Cline said, and what they report helps determine future actions.

The federation also asked nurses to bring hospital supplies. Nick Bejarano, Good Shepherd communications director, helped Cline load up a box of gloves, dressings, ice packs and more.

“We love to support this kind of initiative,” Bejarano said. “It’s a selfless act to help others in need.”

Cline said she wishes she could bring more, but the flights have weight and size restrictions, particularly for the “hopper planes” they will take between islands.

Cline was on a planning phone call Thursday night. She said they were told not

to bring coats or sweatshirts because temperatures at the scene are plenty warm, and don’t plan on having air conditioning in their resort rooms.

Yes, she said, they are in a resort, but one that remains closed.

Comfortable shoes are another must because they will be on their feet for

long stretches. Cline said nurses tend to have that covered.

U.S. territories in the Caribbean have far to go in their recovery from last year’s hurricanes. Sections of Puerto Rico still lack power, and major factories there remain offline and unable to produce drugs, fluids, and other medical resources for hospitals around the globe. Cline said Good Shepherd, like other hospitals, is keeping close watch as those supplies dwindle.

Researchers at the Colorado State University Tropical Meteorology Project predict this Atlantic hurricane season will be a little above average with 14 storms, and seven will become major hurricanes. The season is less than eight weeks away and lasts until Nov. 30.

Cline is on call Friday night to Saturday morning. She said she is hoping the hospital has a quiet night before her husband drives her Saturday to Portland to catch the first of several flights. Getting to the U.S. Virgin Islands from the West Coast, she said, takes 24 hours.

Come Monday, the work begins.

**‘Our goal is we’re going to get every child seen. I’d hate to be that nurse that misses that one kid.’**

**— Tamie Cline, Hermiston nurse who is heading to the United States Virgin Islands to help in the ongoing relief efforts**



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