

Speaker 1:

In this episode of Tim Talk, we open a new chapter in our podcast series where Tim chats with some of our community partners about delivering healthcare that is medically just. Today, Tim sits down with Sergeant Wade Betters of the Bangor Police Department about how we can work together to improve health in our communities.

Tim Dentry:

Thank you for joining us for Tim Talk. I'm Tim Dentry, president and CEO of Northern Light Health. I welcome you to join me for a frank discussion about racial, social, and medical justice. Our goal is to create a collective understanding of the issues that exist, and find a better path forward. Through the first 10 Tim Talk podcasts we have conducted, we have discussed issues of racial justice, medical justice for the LGBTQ+ community, and domestic violence. Today, we are exploring our relationships with our community partners to see where we can work together to better serve our communities. Joining me today is Sergeant Wade Betters, the public information officer for the Bangor Police Department. Thank you for joining me here today. Sergeant Betters.

Sergeant Wade Betters:

Thank you for having me. It's a pleasure to be here.

Tim Dentry:

Sergeant Betters, first and foremost, I want to express my gratitude for what you and the rest of the Bangor Police Department do for the community we both serve. One huge lesson in healthcare we all over again with this pandemic is that health and the risks of poor health start in the home and on the streets. The problems and needs are too great for any one group to go it alone, so we need to be a team and partner in constructive ways, work together to handle the events of real life. The police are on the front line of that effort, as are so many of my colleagues at Northern Light. Thank you for what you do.

Tim Dentry:

The reason why I started these podcasts was to add a human side to our Northern Light Health priority to build a work culture that values equality, inclusion, and diversity. In our society, there are many strong opinions and views on this subject, and emotions run high at times. I'm trying to get the word out that we care deeply for our 12,500 staff and their families, and the communities we serve, as we would care for our own family. These podcasts are just one way in which we are reaching out, listening, and learning from people who care and who we care about.

Tim Dentry:

My first question to you, Sergeant Betters, is this. What could we be doing better to help you serve the community in a way that brings together the best of what our organizations have to offer? Can you cite an example to build upon, such as the existing relationship we have between Northern Light Acadia Hospital and the Bangor police, where two of our Northern Light Acadia Hospital employees serve as community mental health liaisons, riding along with uniformed officers to provide assistance with mental health and substance use calls? Sergeant Betters.

Sergeant Wade Betters:

One of the things I think that would go a long way towards help in both of us is, everyone talks about communication. We send emails, we get together, we nod, we make agreements, but sometimes we've noticed that the follow-through, the agreements we make, or we come to clarity or understanding on what both sides can do, or we're legally able to do things doesn't always translate all the way down to the bottom level. That's a problem that's everywhere in every company. Wherever you go, those are real issues. But for us, for the police officer who might be in the ER trying to get an OUI blood draw, or we're trying to check in with a patient who we need to get information for for a rapidly changing investigation, something that's ongoing. I think that better communication on updates on the law and what a hospital legal feels is within the ballpark communicated all the way down to lower levels would help us do our jobs smoothly and quickly.

Sergeant Wade Better:

We want to be in and out of the ER as best we can. Basically, what it comes down to is that we want to make sure that when there are laws and rules that are changed or into effect that benefit both sides, the hospital's ability to share information with the police without violating HIPAA or exposing themselves to lawsuit or violation. We want to make sure that information is accurately communicated to all the staff that are most of the time the boots on the ground with the police that are going to be exposed to having to making those choices or doing those acts.

Sergeant Wade Better:

We even feel guilty. I mean, I've been there so many times over the years, and you look in the ER waiting room and you see people that, it's very obvious and apparent that they need emergency medical treatment. You might have somebody with a broken arm that's in a sling, or a kid that's still in his football uniform and his knee's off to the side of his leg, and you feel a little guilty when you come in there with someone that's under arrest that's volatile, very vulgar and difficult to deal with, and you need to get them medically cleared in order to get into the jail. For the most part, the hospitals are always great. They kind of put them right to the front of the line, but we feel a little guilty when they're stepping in front of the line for the other people who have been waiting. Right? But, the same time, some of these people are so volatile and angry, they're actually threatening and we need to get them out of that ER as soon as possible. We've always appreciated some of the docs and the staff working hard to get that done.

Sergeant Wade Better:

We are very fortunate with the Bangor Police Department not to only have one, but two mental health liaisons that work for Northern Light through the Acadia Hospital that actually ride in the police cars with our officers. 40 hours a week, we have people riding in the police car. They have bullet proof vests and things on, and they go to calls with us. Obviously, we don't let them come in the room if it's a high risk call, but they're there with us or waiting in the car, waiting outside. They've been very, very helpful. It's crucial, and I can tell you that if we were told that the program was going to end, it would be catastrophic to us based on the level of need that we have in our current community for mental health crisis counseling.

Sergeant Wade Better:

We use them all the time. If we go to a call for a suicide threat or mental health issue, or anything else that's not related but then be comes related to a mental health or substance issue, we will call the officer who has either one of them in their cruiser and say can you come over to this call so they can

give this person counsel. They can spend time with them. I personally talked for a solid 10 minutes trying to convince somebody who was actively using methamphetamine, I tried to talk with them about where their life was going, consequences, there was help, positive change, where they could reach out to get help. The person was not interested. They did not want to talk to me, and mostly because I was in a police uniform.

Sergeant Wade Betters:

I remember having Andrea with us, that particular night, and I had her step into the house and come down and talk with this gentleman. He engaged with her. She talked to him about the things that he could do, where he could get help, and seemed to really connect with him. He even accepted her business card, which is something he was unwilling to do for me. Now, I don't know how the situation worked out, but the lesson I learned there is the fact that, because we have the people in the cruiser with us, it makes our chances at being successful greater.

Tim Dentry:

Very good. I really appreciate those specific examples and that kind of experience and guidance. I know that is information that our hospital, and especially our emergency service staff who are so stellar and do such a great job, they'll learn to be even better partners going forward. Thank you. My second question is about racial and social justice. What thoughts would you like to share that would help our listeners have a deeper understanding of a police officer's perspective on racial and social justice?

Sergeant Wade Betters:

I can see where people are questioning the integrity or the moral compass of some of the police departments and police officers around the country. We've seen things, we watch the news as well, and we're as disgusted by some of the acts that police have done just like anybody else would be. All our officers here at Bangor PD, we receive training in racial injustice and we receive training in dealing with people from different backgrounds, some of their characteristics, their body language and things like that from different minority groups. Bangor PD participates in annual training. We stay up to date on all of the latest training when it becomes available to talk about racial inequities and how we do our jobs, and what we can expect when we encounter people from different minorities, some with different heritages, and some people that are maybe even behaving somewhat erratically, we might get a call on a person, but for that particular person, it's kind of a normal thing for them.

Sergeant Wade Betters:

We look at all those trainings and we approach every situation as dealing with people. Everyone is a person. We participate in a lot of training, so we do have the training. We do engage people in conversation. We always try to solve things through conversation by the officer present, by just talking with people. We do crisis intervention training. We specialize in it, to be quite honest, because it's something we do every day of the week, all day long dealing with people, whether it's phone calls, showing up at their house, trying to deescalate situations. For the most part, we're highly successful at that. But, I wouldn't want the listeners to be fooled into thinking that crisis training and deescalation skills can solve every problem, because that couldn't be further from the truth. There are just some people in some situations that that will not work with. You have to have some cooperation or some willingness on the other side to work through deescalation.

Sergeant Wade Betters:

Sometimes when you have someone that's highly intoxicated on drugs or whatnot, there's no talking with them. You can spend an hour or two, and you still get nowhere. There has to be an end game. There has to be a line in the sand, and oftentimes the police are the line of in the sand. When everything else has been done, we may have to use force, because it becomes necessary. We don't use force until it becomes necessary. That use of force is dictated by the person that we're dealing with. If they make it necessary, then we have to use it. If they don't make it necessary, we don't use it.

Sergeant Wade Betters:

We treat everybody fairly. We treat everybody the same. Again, we get training on racial injustice and inequality issues. We're aware of it. We do know that people are suffering and people have suffered in the past because of it. Sadly, it's still a thing in today's day and age, where people are treated differently based on color of their skin, or their sexual orientation, religious things. We understand that. We do our very best to make sure that, if they're going to be treated differently, it's not going to be at our hand or at our doing.

Tim Dentry:

Thank you Sergeant Betters. I really appreciate your perspective and your thoughts. I want to take the opportunity now to hear what's foremost on your mind with regards to these issues. What would you like to ask of me?

Sergeant Wade Betters:

Well, as partners in our community, I think good communications are key to us working together. How can we keep our channels open? I'm thinking of things like sharing changes in regulations regarding patient information, or other disclosures and medical concerns. How can we better manage what we can expect from you, and you from us?

Tim Dentry:

Thank you. Great question. I believe it starts with respect for the police and what you do to keep our communities safe. It includes an understanding that health and healthcare does not begin when someone reaches our doors at Northern Light, it starts in the community where they live and how they live. That is your canvas. If I could use that analogy for the most part, and so at Northern Light, we're trying to find ever more meaningful ways to connect and engage in the communities we serve, from Prescott to Portland, Blue Hill to Greenville, through Elsworth, Bangor, Waterville, Pittsfield, Dover, Fox Croft, and everywhere in between. I am so proud of our emergency department staff who are joined at the hip with our police departments, I know. I'm in awe of our home care service that goes into the homes of those we serve hundreds of times a day. We have care managers and social workers that are very connected with those that we serve that need our services. Many of our doctor's offices are located right in the neighborhoods.

Tim Dentry:

We're trying to make sure that we learn more about the social aspects, the social determinants of health. I welcome an even more connected line of communication, perhaps to be more proactive together, as I'm hearing you say. This is essential right now with a COVID-induced increase in domestic violence, opioid troubles, homelessness. My commitment to you is that, starting with Acadia and EMMC, we will build on our working relationship with the Bangor Police Department and look for ways to be

proactive, so that, as I often say at 3:00 AM on a Saturday night, our good communication channels and planning results in the smooth, safe handling of the situation.

Tim Dentry:

At Northern Light Mercy Hospital in Portland, we've worked really hard on safe discharge plans and linking patients with service. When issues have occurred, we have met with the police to discuss the cases, and have taken action internally to address issues. This has included representatives from the mission area, the ED, security, and executive management. We have regular meetings with police agencies at the executive level, and with officers at the patrol level, and we assist them in dealing with neighborhood issues. I believe we can take that model, I know I've already spoken with the leaders of EMMC as well as Acadia, and there's a great willingness to even find greater levels of cooperation and coordination.

Sergeant Wade Betters:

That's a great answer. I like all the talk about an increased cooperation and coordination. You hit on something about the COVID in the pandemic, kind of relates a little bit back to what we had talked about as far as kind of educating our surrounding communities at Bangor and Northern Light. It can't be the only entity dealing with a lot of the pandemic related issues when it comes to homelessness. It's not an easy task, probably, to be a person at the hospital tasked with finding a proper place to discharge someone that's safe. That's why we need help from our surrounding communities to do less dump and run, so we can have more of a connection to the people, more of a connection with the people who brought them in for medical treatment, so we can get their help in returning them to their home communities.

Sergeant Wade Betters:

What do you do when you have people that are outside all night long in the cold, when they just want to come sit in the ER, coming up with illnesses? Sometimes it's an absolute, I'll be honest with you, sometimes people fake injuries or illnesses just to get into the hospital. I know that to be fact, so I'm very comfortable saying it. But, the hospital itself should not be a dumping ground for the ER, just for a warm place to be. Communication with our neighbors and our surrounding communities might be a little bit more helpful so we can get some accountability back on them.

Tim Dentry:

Very good. Sergeant Betters, I will admit that I was not fully aware of this kind of situation. I agree, we have to find a better way to get the right care for people without relying on the police for transportation, or that's their sole portal for care. I don't know what the right way to do this is, but I do know that we have Northern Light caregivers and hospital leaders that are closest to the action who are best equipped to do this right. I have utmost confidence and trust in them. Knowing those people, I'll let them know that this is something to look into and work on with the BPD and other police departments in the region. I think we can find ways to help with both the accountability of those who bring the patients to our doors, and also work on smoother connections with social services and other kinds of supports systems in the community.

Sergeant Wade Betters:

That all sounds great. I'd love to see a day in the future where we could have additional people from the hospital system out in the cruisers to be able to respond and come out into the field to join us on some

maybe lower level things. That would be helpful as we continually try to divert people from going to the ER unless it's absolutely necessary. One of the things we had talked about earlier was just the fact that there's a whole generation of people that have just become reliant upon emergency medical care treatment for everything medical in their life.

Sergeant Wade Betters:

Sometimes it's frustrating for us, and we go into the ER and we're thinking, oh boy, I got to get over to the charge nurse quickly and tell her that everything that could be done to prevent our visit tonight had been done, but it all failed and that's why we're here. Having people out in the field with us, or maybe joining the workers from Acadia, or hooking up with city public health, going out and doing onsite vaccinations for flu and hep, and the like that, those are all things that benefit us, that also help us keep people from flagging us down or going into the ER when it's not really necessary.

Tim Dentry:

Very good. Thank you so much. That will wrap up this episode of Tim Talk. Sergeant Betters, I really appreciate you being here and joining me to help us continue this conversation that we are having with our podcast listeners, but in particular, the time we've spent together, I really, really value that and appreciate that.

Sergeant Wade Betters:

Thank you.

Tim Dentry:

Thank you to you, our podcast listeners as well. Until next time, I'm Tim Dentry, encouraging you to listen and act to promote our culture of caring, diversity and inclusion.

Speaker 1:

Thank you for listening to this episode of Tim Talk. If you enjoyed this podcast and would like to learn more about this subject, you can find additional information northernlighthealth.org/podcast. We welcome you to join us on November 19th, when Tim will be starting a new series on religious diversity and tolerance.