

Concerns Raised by the Chirurgeonate concerning Pennsic 35

The Chirurgeonate as a whole has expressed deep concern and distress over the events that arose at Pennsic 35. Repeated requests have been made for more information about incidents that occurred to trigger the suspension of Chirurgeonate supervision of First Aid triage and coordination.

The Board of Directors collected and received extensive information from a wide range of sources including the Mayor of Pennsic 35, the Principal Kingdom Seneschals, the Society Seneschal, the Society Chirurgeon, the Pennsic War Chirurgeon-in-Charge, Chirurgeons on staff at Pennsic 35, parties directly involved in various incidents, and a number of interested and concerned laypersons.

In our review, the Board has determined that poor communication and the willful spread of rumor and misinformation, combined with highly emotional interpretations of the words and actions of others, were responsible for making these events far worse than they ever should have been.

Comparatively, the number of incidents that arose at Pennsic 35 to cause concern was small, involved a very small number of Chirurgeons, and was similar in number to issues that arose in previous years.

However, the circumstances of these incidents appeared to be serious enough that the Mayor felt equally serious corrective measures needed to be taken. This decision was supported by the Society Seneschal, and was made in consultation with the Society Seneschal and the three host Kingdom Seneschals. When notified of the decision, the Pennsic War Chirurgeon-in-Charge advised the Mayor that she understood the decision and ultimately supported the Mayor's authority to make the final determination of what the Mayor believed was the best course of action for the War.

In providing this FAQ, the Board has attempted to address the major concerns that we have heard expressed from the Chirurgeonate, and share at least some of the information that we have received. Given the sensitive nature of information contained in the materials we have received, we will not be releasing any of that "raw" information for public review. Due to the volume of material we have received, it is not feasible to attempt to redact the individual reports to make them available for public review.

We are aware that this report will not completely settle all of the questions that may exist. However, we are providing in good faith as much information as we feel is appropriate in an attempt to help all parties move forward. In the volume of information we received from both first hand sources and third parties, there were different interpretations of the situations, together with a vast quantity of anecdotal information that cannot be verified. We have tried to distill as much fact as we can, but there will be no way to fully resolve all of the issues that arose at Pennsic 35.

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For the most part, the Board has no desire or inclination to assign blame to any specific individuals or groups with respect to Pennsic 35, although there are places where we point out actions and responses that exacerbated already tense situations. Rather, it is our intent to use the information collected as a basis for determining what areas need to be addressed to avoid future episodes like this from occurring. Further, we hope that the information collected results in more options and improved methods to help Event Staff members at other large events who may find themselves dealing with similar issues in the future.

This information is being provided as a courtesy. We will not be entertaining any further discussion of this information. While we have relied upon the broad array of information we received in preparing this document, we do not warrant the accuracy of any one instance. We have been given this information from many sources, and this is a compilation of many corroborating source materials.

We understand that this document will engender discussion, and that people may disagree with some or all of the findings presented. It is not the Board's wish to stifle free speech or dissent. However, we do require that anyone who comments on this information present their conversations on list serves and public forums in a civil, professional, and constructive manner. "Flames" and comments that could be construed as defamatory and/or libelous will do nothing but increase the hostility that already exists.

With that said, if you have constructive comments and ideas as to how these kinds of situations could be avoided in the future, please forward them to me at sreed@director.sca.org.

Sincerely,

Shawn Reed
Director, SCA Inc.
Ombudsman, Chirurgeonate

The Chirurgeonate was disbanded.

The Chirurgeonate as a whole was not disbanded, either by the Pennsic Mayor or any Society officer. Nor was the Board of Directors asked to disband the entire Chirurgeonate. No warrants were revoked, and all warranted Chirurgeons remained officers in good standing of the SCA, Inc.

The situation at Pennsic was an event management issue, and limited solely to the operation and coordination of first aid activities at Pennsic 35.

At the beginning of Pennsic 35, the War Chirurgeon-in-Charge (War CiC) Viscountess Kaellyn and her staff were responsible for the coordination and management of triage and first aid activities, with support by and referral to Northwest EMS (NWEMS).

On Friday August 11 and Saturday August 12, circumstances arose that led to the responsibility for coordination and management of triage and first aid activities to be transferred to NWEMS. Because of concerns that problems with Chirurgeonate procedures might be systemic, it was decided it would be best to suspend organized Chirurgeon activities. However, individuals who wished to volunteer as first aid staffers were invited to do so, under the supervision of Viscountess Kaellyn and NWEMS. As such, they would be acting as volunteers of the SCA.

No warrants were revoked, although a very small number of Chirurgeons directly involved in some of the incidents received counseling or disciplinary action. All warranted Chirurgeons acting at Pennsic remained officers of the organization with the associated insurance benefits.

The Mayor and Seneschals did not have the authority to suspend Chirurgeon activities.

There has been a great deal of discussion on the authority of the Mayor and the Seneschallate to suspend ongoing Chirurgeon activities during the course of an event. If nothing else has been made clear, it is this: the Chirurgeons' Handbook and the Governing Documents are not fully in accord with one another, and neither speaks as clearly to this type of situation as apparently is necessary. Throughout the reports that we have received, the Board has seen the same sections of the Handbook used to support diametrically opposing interpretations of who had what authority.

To this end, the Society Seneschal and the Society Chirurgeon will rework the Handbook *and* the Governing Documents in order to clarify such issues.

Regarding the reorganization of first aid at Pennsic, the Board of Directors upheld the Society Seneschal's policy interpretation that Event Stewards have the right to hire, remove, and reorganize members of event staff, and have the authority to re-organize first aid (see the

President's Report of the October 2006 Board meeting for the specific text of the policy interpretation).

What were the incidents that cause Chirurgeon activities to be suspended?

The Pennsic Mayor, Mistress Brise, reported three incidents that occurred in a relatively short period of time that raised substantial concerns and triggered the suspension of Chirurgeon supervision of first aid at Pennsic 35.

Incident One

NWEMS reported to the Pennsic Mayor that an individual went to Chirurgeons' Point with vomiting, pale skin, dizziness, and headaches. Chirurgeons' Point cared for the individual with sips of water and potato chips for 2 hours before NWEMS became aware of the situation, at which time they treated the individual with IV fluids due to heat-related dehydration. It was the opinion of the NWEMS paramedics that the care provided by Chirurgeons' Point put the individual at substantial risk.

Investigation by the War CiC immediately after the incident, and confirmed by the Society Chirurgeon's report, revealed that:

- *The length of time the individual was at Chirurgeons' Point was misrepresented, and was shorter than originally thought,*
- *The Chirurgeon on duty did initially refer the individual to EMS, but the individual refused, and*
- *The potato chips were given later when the individual was beginning to feel better and requested something to eat.*

However, the War CiC also found poor judgment and documentation errors made by the Chirurgeon involved. Specifically, the War CiC found substantial discrepancies between documentation and first hand witness reports. The War CiC took appropriate action to deal with the Chirurgeon involved, who was suspended for the War and remanded for additional training in procedure and documentation. The Pennsic Mayor was not aware of the documentation discrepancies or any of the other findings, until after Pennsic 35 ended.

Incident Two

The Mayor received a first hand account that Public Safety Dispatch received a call from an encampment requesting Chirurgeon assistance for a "medical emergency." The Mayor was told that Dispatch notified Chirurgeons' Point that there was a "medical emergency" call, and that Chirurgeons left the pavilion and asked NWEMS paramedics to move off of a golf cart so that the Chirurgeons could take it. NWEMS asked twice what was going on but did not receive an answer. NWEMS described the Chirurgeons' expresses as "very intense". Dispatch received a second call from the encampment, this time requesting an ambulance. Dispatch

notified NWEMS directly, who immediately went to the encampment. NWEMS treated the individual, who was thought to have been having a seizure.

The Mayor's concern was that Chirurgeons responded to a report of a "medical emergency" rather than immediately notifying NWEMS of an emergency, thus potentially endangering the life of the individual.

Following the incident, the Mayor and the War CiC interviewed the Public Safety Dispatcher and the Chirurgeons present at the point, respectively, to try to verify what happened and determine if Chirurgeon procedures had been followed or not. In the course of the interviews, the Mayor and the War CiC received differing reports as to whether the initial notification to the Chirurgeons specified a "medical emergency." As there were conflicting results of these interviews, the War CiC intended to make further inquiries but did not have the opportunity to do so. During the war, the discrepancies could not be resolved and the concern remained that Chirurgeon procedures concerning a report of a "medical emergency" had not been followed appropriately.

During her subsequent investigation, the Society Chirurgeon was also unable to verify exactly what the Chirurgeons were told on the first call, due to the conflict in first hand accounts.

Incident Three

An individual with a rapidly and visibly spreading rash went to Chirurgeons' Point and requested referral to the doctor or to EMS. The Chirurgeon at the Point was involved in conversations with two other people and asked the individual questions such as "Are you taking any medications? Did you change medications? Did you change laundry detergents? Did you get into something?" When the individual again requested referral to the doctor or to EMS, the individual was told that the doctor was unavailable, the Chirurgeons did not know where EMS was, and did not know how to contact EMS. The individual, feeling numbness in his lips, left Chirurgeons' Point without completing any paperwork or receiving referral to EMS. He found his wife and they drove to the hospital. He was immediately treated in the hospital with IV steroids. The doctors at the hospital ER told the individual's wife that a longer delay would have most likely resulted in the individual's death.

The details of the incident above were relayed to the Mayor by the individual's campmates (who were in contact with the individual's spouse at the time), shortly after they went to the hospital. The Board of Directors has since received direct confirmation of these details from the individual's wife.

The Mayor additionally notes that at the time the incident occurred, NWEMS was available 24/7 by radio, and were in fact on site, wearing bright green "EMS" shirts, in their camp approximately 150 feet from Chirurgeons' Point.

The War CiC did not have an opportunity to review this incident.

The Society Chirurgeon attempted to review the details of this incident during her investigation but, despite her best efforts, was unable to definitively identify the incident. Due to the urgency of the situation, the individual left without completing any paperwork and as such there is no documentation to pinpoint the incident for sure.

Couldn't other steps have been taken to deal with these individual incidents, rather than changing the organization of Chirurgeons' Point as a whole?

These three incidents occurred in a relatively short span of time, and involved different Chirurgeons. There was a very real concern that the procedures the Chirurgeons were using were breaking down or not being followed correctly. The War CiC and the Mayor initially attempted to work out solutions following steps that had been used in the past for dealing with procedural problems and quality control issues. However, as problems continued to arise, the Mayor's observation and concern was that the Chirurgeonate at Pennsic was not functioning in a safe and effective manner, and the processes in place were not working properly.

Based on the information available *at that time*, the Mayor felt that having the Chirurgeonate remain in charge of coordination and management of first aid activities at Pennsic posed a potential danger to the safety and wellbeing of the populace of the event. It was the Mayor's responsibility to make a decision that she felt was in the best interests of the entire event populace. She consulted with the Society and host Kingdom Seneschals about this decision. She also consulted NWEMS before taking this action to confirm that they were capable of taking over responsibility for all event triage.

The Mayor did work with the War CiC to some extent to try to find less extreme methods of dealing with the issues as they arose, but ultimately felt that those methods were not effective. The War CiC was not included in the meeting at which the actual decision was made.

Many people disagree with the decision that Mistress Brise made. However, it has been agreed from both the Operations side and by the War CiC that the responsibility for making this decision rested with the Mayor, and that Mistress Brise was acting in what she felt was the best interests of the Pennsic populace.

The populace was placed in danger because first aid was suspended, and the ability of Chirurgeons to provide care to the populace was disrupted.

At no point was first aid or medical care suspended. The management and coordination of care was changed, but emergency medical care was always available, and Chirurgeons were asked to continue providing first aid care.

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Some concerns have been raised that NWEMS did not have sufficient staff to fully accommodate the attendance at Pennsic War. It was determined in the course of the investigations that NWEMS was advised of the situation and, prior to the final decision, they did confirm that they felt they were capable of managing the first aid at Pennsic.

Many Chirurgeons (particularly those holding modern advance certifications) were hesitant to assist as first aid providers because they were unclear about their liability protection under the Volunteer Protection Act in the new organizational structure.

Both of these are valid questions that will be more fully explored in future by a committee to help lay out better policies and procedures for dealing with first aid and medical care at major interkingdom Wars.

No information about the Mayor's decision was presented during the War.

It is true that there was a substantial void in providing detailed information about the circumstances that led to the reorganization of first aid care at the War.

Concerning the incidents themselves, the Mayor felt that it would be inappropriate to discuss specific details, in order to protect the privacy of those individuals who were directly involved in the incidents.

Additionally, the Mayor adds, "I did not print my reasons for the change because I did not want the Pennsic Community to lose trust in the Chirurgeonate. I felt that stating that there were grave concerns, disciplinary actions taken, or that an individual's life was put at serious risk would cause further consternation than was necessary. It was my intent to simply state the change and move on."

In retrospect, had more information been provided in a more timely manner and with some additional detail, it is likely that things would not have become as unpleasant as they did. Additionally, the way that information was communicated by the Operations staff **AND** within the Chirurgeonate was severely flawed.

However, once it became clear that the information void was more damaging than originally realized, attempts were made to reopen communications and improve the situation. The Pennsic Mayor and East Kingdom Seneschal hosted a question and answer session to try to address questions and rumors. Members of the Board of Directors who were present at the War and had a general "Town Hall" meeting scheduled, entertained a great many questions even though they were not involved in the management of the War and were not involved in the decision making process. Information was published in the Pennsic Independent.

In all of these instances, attempts were made to provide clarifying information without releasing sensitive information. Attempts were made to deal with rumors.

While there were problems with the delay in providing information by the Pennsic staff and the host Kingdoms, while many believe that the information that was eventually provided was insufficient, and while the manner in which some Operations staff presented information was uncalled for, some members of the War Chirurgeonate significantly contributed to the escalation of rumor, misinformation, hearsay and hostility. In meetings where the Mayor's staff and the Board attempted in good faith to share information and facts *as they knew them*, some Chirurgeons repeatedly challenged and disputed comments and statements, and behaved in a thoroughly unprofessional manner. Rumors and third hand anecdotes were repeated at will for the duration of the War and continue to be repeated to this day. Such behavior was not and is not of any assistance in this situation.

Additionally, public statements were made at the War, on line and in the Pennsic Independent, by the Society Chirurgeon and some senior Chirurgeons in her chain of command that were based on incomplete or incorrect information. Those Chirurgeons should have referred questions to and/or fully discussed responses to questions with Viscountess Kaellyn, as the Chirurgeon in Charge for the War and the responsible party handling the various situations. While the Society Chirurgeon and her staff had good intentions and were attempting to share what they believed they knew and answer questions and concerns, the result of some of their statements was to increase, rather than alleviate, confusion.

Chirurgeons were told they must wear modern garb if providing first aid, were prohibited from wearing Chirurgeon insignia, and were threatened with expulsion from site if they did so.

As has been reported by senior Chirurgeons who were present at information meetings, as well as commentary from the Mayor, it was never the Mayor's intent that individuals be prohibited from wearing Chirurgeon regalia or ejected from site for doing so. Modern clothing was not required of anyone volunteering to provide first aid after Chirurgeons' Point was closed.

It appeared that some individuals on site may have gotten carried away and misrepresented the Mayor's intent. It should be noted that such persons were not on the Mayor's staff and were not speaking in any authority for the Mayor's office. This was addressed by the Mayor in a public meeting at Pennsic.

Communication between NWEMS and the Pennsic War CiC was prevented until the beginning of the War.

Viscountess Kaellyn was not prevented from contacting NWEMS prior to the War. In fact, she made several attempts to contact NWEMS, starting as early as March 2006, with the Mayor's knowledge and approval. Unfortunately, despite her best efforts, Viscountess Kaellyn and the owner of NWEMS did not connect with one another until the opening of the War.

This year's Operations staff did choose different methods of interacting with the EMS vendor than had been used in previous years, but this did NOT include preventing contact between the War CiC and the EMS service. It is certainly acknowledged that communication between the War CiC and NWEMS could have been conducted in a more efficient and effective fashion. However, this does not appear to be the fault of any member of the SCA. This will be another issue that will be addressed for future major Wars.

NWEMS did not have realistic expectations of what they were going to deal with, were understaffed, and did not perform well.

NWEMS was in contact with the Pennsic Mayor's staff well in advance of the War and was given information on the specifics of Pennsic War. NWEMS has substantial experience with a wide variety of large events of a similar scope to Pennsic.

NWEMS works under the direction of Dr. Stein, who is also the physician who oversees and directs Portersville EMS, the previous EMS provider at Pennsic War. Some of the paramedics working with NWEMS did have prior first hand experience with Pennsic War. The owner of NWEMS met with members of Portersville EMS, Slippery Rock Ambulance Service, the local Volunteer Fire Department, the Homeland Security Planner, Butler County Emergency Services, Dr. Stein, and local hospitals prior to Pennsic in order to review incident rates, type of injuries to expect, transportation volume, and other preparatory information.

During the early days of the War, NWEMS staff members were given introductory instruction on some of the issues unique to SCA battles, including an armor extrication class. [NOTE: NWEMS did not remove armor at any time during the event.]

For the most part, reports are that NWEMS did a good job of responding to the needs of Pennsic War and enjoyed the experience. There were some reports of problems, which would have been expected with any new vendor, but we found those to be exceptions, not the norm.

It would be completely inappropriate to categorize NWEMS as being unprepared for the demands of Pennsic 35.

NWEMS abandoned an injured fighter on the battlefield, and in another instance exacerbated an injury sustained by a fighter when they attempted to extract the fighter from armor.

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These reports have been investigated, and neither has been found to have merit. At no time did NWEMS paramedics abandon any patient. As stated above, NWEMS did not remove armor at any time during the event. In the specific incident that has been mentioned on several occasions, the fighter was already out of her armor when the NWEMS medic and doctor arrived on the scene.

There were agreements well in advance with NWEMS that they would be in full control of medical provision management at the War.

The contract with NWEMS was the same one that was used in previous years between Pennsic War and Portersville EMS. There is no evidence that any advance arrangements were made with the intent of giving NWEMS authority over the SCA's basic first aid volunteers/Chirurgeons.

Paperwork was changed unexpectedly during the War, causing confusion among the Chirurgeons.

Although this is not directly related to the suspension of Chirurgeon activities at Pennsic, there has been discussion off and on between the Board of Directors, the Legal Committee, and the Society Chirurgeon and her staff concerning the kind and amount of information that is appropriate to collect and maintain, given that the SCA covers the provision of first aid only.

At the beginning of the War, the Society Seneschal had the opportunity to review a copy of the incident report form that was being used at Chirurgeons' Point. In consultation with the Society President, this form was edited at that time to remove information fields that were felt to be associated with the needs of advanced certification providers rather than those of first aid volunteers, which is the mandate of the Chirurgeonate. Chirurgeons' Point was given instructions to use the edited form.

After reviewing the changes, the Pennsic War CiC requested that some of the fields that were removed be added back. The Society Seneschal and President agreed with her reasoning and the forms were changed again. This was the final format that was used for the majority of the War.

The timing for making these changes was unfortunate and contributed to the confusion that was prevalent at Pennsic 35. What went before cannot be changed. For the future, the Society Seneschal and Society Chirurgeon, in consultation with legal counsel, will develop an acceptable Society-wide standard for information on incident report forms.

Chirurgeons were accused of stealing medical records documents.

Pennsic War provides a voluntary form that all attendees may complete when they attend the War. These forms include basic information about medical conditions, allergies, etc. The idea is that this information is easily and immediately available to emergency medical personnel, if needed.

Following the reorganization of first aid coordination and management, concerns were raised that these forms, as well as other items (including site maps necessary for prompt and efficient location of incident and patient locations) had been removed from the Point. While the SCA is not required to comply with HIPAA, we do take seriously the protection of sensitive information. There were serious concerns when the voluntary medical documents and other items could not be located in the Point, not just because of privacy but also because these documents would not be available for their intended purpose, providing potentially helpful information to NWEMS if needed.

There were allegations that the Mayor had the medical information in her possession under lock and key; however, at no time did she have these documents. Other allegations were that the records were in the control of the Society Seneschal, or that they had been “stolen” by individuals within the Chirurgeonate.

Eventually the records were determined to be in the possession of the Deputy Society Chirurgeon. He reported that he secured them when the Point was “shut down” so that they could be included with end-of-event reports. When concerns were raised about their location, the records were passed into the custody of the War CiC, who maintained them in accordance with standard Chirurgeon policy and procedure.

In this case, standard event management procedure would be that it was the War CiC’s purview to secure these records, as she was the Event CiC and would be responsible for making all reports and dealing with the storage of any and all reports and records. Circumventing accepted event standards, even with the best of intentions, helped to exacerbate the growing hostility surrounding Operations staff and Chirurgeon staff interactions.

A final note from the Board of Directors.

It is our opinion that the vast majority of the Chirurgeons are honorable and generous people who work hard to provide a valuable service to the SCA as a whole. It is also our opinion that the vast majority of the Pennsic staff and all Operations personnel throughout the SCA are likewise honorable and generous people. We believe that most Chirurgeons and Operations staff would agree with this.

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We would like to acknowledge the hard work and dedication of all of those who put in long hours at Pennsic 35. We know that many people throughout the SCA were distressed by the events that arose at Pennsic. So were we. We deeply appreciate the time and efforts of those who shared their experiences with us, and took the time to investigate what happened and report their findings.

We would like to reiterate that the best use of this information is to correct errors and omissions in policy and procedure, improve methods and manners of communication throughout the SCA, and attempt to find ways to better handle (if not avoid entirely) such situations in the future.

We found in the course of our investigation that difficult and controversial decisions were made, and that some individuals (both from the Chirurgeonate and from Operations) reacted badly to those decisions and subsequent actions and responses. We have pointed out in various places in this document where we believe certain individuals may have erred or could have taken other actions to defuse the situation.

Beyond those comments, however, we have no wish to dissect this matter further. What is done is done and we wish to view Pennsic 35 as a learning experience. In particular, we expect the offices of the Seneschal and the Chirurgeon, at all levels, to work together in a professional manner, and learn from recent events.