

AN INTERVIEW WITH JILL ROBERTS

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SPECIAL COLLECTIONS & ARCHIVE

This is Barbara Tabach. Today is March 20th, 2018. Claytee White and I are sitting with Jill Roberts from TIP [Trauma Intervention Program].

Jill, spell your name just so we edit right.

Jill Roberts; J-I-L-L, R-O-B-E-R-T-S.

How long have you lived in Las Vegas?

Since I was two years old, 1977.

You've seen a lot of change.

Yes.

You mentioned that you're a UNLV grad.

I am.

What did you major in?

I majored in hotel administration. [Laughing]

How did you get to here? Tell us that story.

I worked in that industry for fifteen years. I was in hotel management. I was at the Westin Hotel for seven years prior to my change of career where I was the Director of Revenue Management, and I enjoyed what I did, but I didn't have that feeling at the end of the day of going home knowing that I made a difference, as cliché as they sounds. I had started volunteering with the Trauma Intervention Program and absolutely fell in love with the organization, found it to be my passion. Little did I know that shortly after starting to volunteer, I would be given the opportunity to run the organization. It was a tough decision to make because I went from corporate stability, on the track to success, and changing to a nonprofit where there is...Where do you get your money? How do you get your funding? All of that kind of thing. But I did and I've never looked back. I absolutely love what I do.

That's wonderful. What kind of staffing do you have?

We have three full-time staff members here who this is their primary job, working full-time. Then we have eighty volunteers right now who donate their time and talents. They commit a minimum of three twelve-hour shifts a month, plus some continuing education. It averages out to about forty hours a month minimum that they're giving of their time to work for TIP [Trauma Intervention Program of Southern Nevada].

What is the qualifications to be a volunteer?

Minimum age of eighteen. We do background checks, driving record checks, interview process, application process, and then there is a forty-hour initial training academy that's also a screening process, and once they make it through that then they go into three months of field training where they go out with a veteran volunteer on any scenes before they're able to go out on their own.

CLAYTEE: *What is it that they actually do?*

What they're doing is, at the request of emergency responders, they're going to scenes of tragedy where they're providing emotional and practical support. What the process is, is a tragedy occurs—and by tragedy, most of the time I mean death; I'd say about 98 percent of our calls are death related—so someone dies either in their home or in a business or on the side of the road or in the desert, and emergency responders arrive to that location—paramedics, police department, coroner's office. When they get there, they establish a need for emotional and practical support and they call us and ask us to come out to the scene. Our volunteers are arriving within a half an hour of getting that phone call and working alongside with the emergency responders in providing support to the individuals on scene.

Where do you get your funding?

We do get funding from all the agencies that we work with, so all the fire departments, all the police departments. Las Vegas Fire and Rescue has given us office space. It's not enough to pay our bills, so we do have fundraisers and I write grants and things like that as well.

I saw an article that this Consumer Technology Association gave you a donation of sixty thousand; is that right?

Yes, they did. Yes, after One October.

That was wonderful.

Yes, very much so. That's the part of this job that...I don't think anybody in nonprofit management loves to fund raise. What they love to do is what they're passionate about, their organization whether it's animals or the environment or what we do. I would much rather be sitting on the side of the road with someone providing support than fund raising, but it's a necessary evil. It's so nice when companies or individuals do see that need and give.

You mentioned that you just came from a night working with the coroner's office.

Yes. Part-time I am also a death investigator with the coroner's office, the Clark County Coroner's Office. I've been doing that for about five years, and what I do in that capacity is go out to any unattended death that takes place at home, side of the road, very similar to the types of calls that TIP responds to, but in the capacity of a death investigator, so I am trying to start the process of figuring out cause and manner of death, doing a physical examination on scene, interviewing anyone on scene to figure out what happened, medical history; things like that. Other responsibilities of ours is to notify legal next-of-kin, so we're the ones that knock at the doors, telling people their loved one has died, and also making positive identification. We're trying to assure that the person who has died is the person we think it is.

I expected a lot of that to be done by police officers, according to television.

A lot of people do think that. Right. A lot of people see the police officers on CSI or whatnot knocking at the doors. But here in Clark County, it's the coroner's office that does that.

What prepared you to make that...? That's a really significant career divergence that you would be responsible for that.

Yes. I think from starting my volunteering with TIP, which was ten years ago last month, I just really developed a passion for people in the immediate aftermath of tragedy. We can't make it better. We can't at the end of the day say, "Have a nice day," because they're not going to. But what we can do is make the process a little bit easier for them as they're going through it. When I started as a volunteer with TIP and I saw what investigators with the coroner's office do, I thought, *that kind of fits into my own personal drive and being and person of doing that, making sure that the process is just a little bit easier for those individuals going through.*

I would say my forte, my specialty is death notifications because I have the emotional practical side of TIP and I also have that medical analytical side with the coroner's office, combine them together. That has become kind of my specialty is doing the death notifications. I also have certification through Colorado State University in their Grief and Loss program. It's just a passion of mine.

Through Colorado State.

That's where I got the certifications, yes.

Ever meet Laura McBride?

No.

She might not be involved anymore. I've worked with the funeral industry as a consultant historically, so I knew some different people that would have been involved in that education.

When I first started with TIP, and even now, I don't go out on scenes as often as I used to in the capacity of TIP because someone's got to buy insurance and run the office and pay the bills and all that stuff. But I remembered thinking sometimes emergency responders cannot be as compassionate in their delivery as they could be, and so that was kind of a driving force, too, of why I wanted to do what I do with both jobs. We do a lot of education with TIP with the emergency responders. I have taught every firefighter in this valley, of course, on having those difficult conversations with families. What do you say? What do you not say? How do you change from that fix-it role of saving a life to, okay, this life can't be saved anymore; I can't fix the problem? How do I now transition into care? We do a lot of education with emergency responders in that.

That's good to know.

What do you say?

In what type of situation?

If you knock on my door to tell me that someone has passed.

There's a lot of research that goes into what exactly works, what the best way of doing that is. What I do is just be upfront, be direct, and let someone know. Of course, first confirming that it's the person I need to be talking with. "I am so sorry that your son was involved in a motor vehicle accident this afternoon and he died." I then give them the opportunity to process what I said and then ask them, "What kind of questions do you have?" Because sometimes people want to know, well, what happened? Where another time, they're not there; they want to know, where is he right now? When can I see him? Or something totally different, I went and made a death notification one time a couple of months ago where I told some parents that their son had died and they said, "Well, how are his dogs?" His dogs were what was important to him and he had been in his

home for a few days, and so, "Where are the dogs? We need to figure out what's going on with the dogs." So we got that all taken care of. It's always what that person needs because everyone is different. What I might need isn't what you might need, so I always want to be perceptive of what your needs are.

Thank goodness for you. That's really good. Let's talk about October first. What were you doing on that Sunday?

I was getting into bed, just a normal Sunday night. I was tired. We had had a long weekend of fun in the family. I got a phone call from one of the higher ups at Metro. My phone started ringing, *Las Vegas Metropolitan Police Department*. I looked at it and I thought, *what the heck? It's ten thirty at night. Why is she calling?* I let it go to voice mail. Then I am thinking, *I better call her back. Why would she be calling me at ten thirty at night on a Sunday?* I called her back and she said, "You need to get out of bed and get your team together and get rolling. We just found out that there is an active shooter. We have very limited information at this time, but we know there is multiple fatalities. Get ready."

I called my two staff members. We decided pretty quickly that one of them would kind of be our control. He came to the office here and just did all of the dispatching out of everyone. We sent a mass text to all of our volunteers saying, "Who can be ready? Who can get to work?" I got myself ready.

By that point, we kind of had an idea of where we needed to go. This individual with Metro called back and said, "All right, we know that there are people that have been sent to Sunrise, Valley, UMC. We've got the scene working." I think that early on those were the first places that we went to. I, myself, went to Sunrise Hospital. Our other staff member was kind of in limbo waiting to see what else was going to happen. We had probably at that time maybe ten

or twelve other volunteers that went out to Sunrise, UMC, Valley, and the scene. Within several hours the phone was just nonstop here at the office. We then sent volunteers out to Metro Headquarters to start getting together the family—it went through so many different names—Resiliency Center; that's where our other staff member went to start helping with that process. We went to Spring Valley Hospital. We went to Centennial Hills Hospital. We got called out to the jail at City of Las Vegas because someone had had a family member that was present. We were strewn all across the valley. We honestly went nonstop for about two weeks.

Yourself, where did you go initially?

I initially responded to Sunrise Hospital and I was there with two other volunteers. I was there for about twelve hours. First of all, I have to give Sunrise Hospital a lot of credit. They really did a great job. They were as organized as I think anyone could possibly be organized in a situation like that. They really had it together. We arrived and I think he was the COO of Sunrise Hospital was standing in the lobby directing people where to go. They had all hands on deck. We jumped in just doing whatever it was that they needed us to do at that moment, which was separating out people who had family members that were in the emergency room versus people who didn't. It was utter chaos. A lot of people were tourists, so they didn't know the hospitals, where to go. You had a lot of people that knew that maybe their loved one or friend went to a hospital, but they didn't know what hospital. Everyone is just confused. *Are they here? Are they not here?*

Once we were able to identify, yes, your loved one or friend is here, we sectioned them off into an auditorium. During that process one of our volunteers was kind of doing that and I went into the auditorium and started just providing support. There were people there that didn't have shoes on their feet and didn't realize it; that had blood all over their clothes and didn't know whose blood. We were doing very practical things, like Sunrise found a bunch of old scrubs and

T-shirts from somewhere and we're handing out clothes and bottled water, just trying to get everyone's practical needs met while the hospital was sorting through who is where, what's going on, who's alive, who's dead.

They gave me a list of people who they knew were at Sunrise, but that's all we knew at that point. I was calling family members, friends, just saying, "Okay, we know your loved one is here; that's all that I have; that's all the update that I have. As soon as we have any other information, we'll be able to provide that for you."

Throughout the twelve hours it progressed to—there was just so much we were doing. People who didn't have any identification on them, we were asking family members, "Write down what your loved one was wearing," because we're not quite sure who some of these people are. Towards the end of the morning, my role was going with one of the emergency room physicians. We had called in all of the family members that we knew had family or friends that had died into separate rooms, and we just went from room to room to room doing death notifications and providing whatever support we could with that. That was my role at Sunrise.

How many volunteers did you have supporting you in the logistics of notifying people?

There were three of us that were taking a family or a friend at a time. We usually spend a lot more time with people, but given the circumstances we didn't have the time, the manpower; the people. It was just crazy. But we did what we could. I'll give you a few examples of some of the support that I was able to provide.

There was a gentleman that came to Las Vegas with his fiancé from Canada. They didn't know anybody here. They were here for the concert, for a good time, and she had died. What was important to him were the practicalities of, *how do I get home? What do I need to do at the hotel to get checked out? I need to call her family.* So I was helping with those things, even calling

airlines and doing that kind of thing.

Others, what their needs were, a lot of the others were emotional, so just being there for them as they were telling their story. As you know doing oral histories, people's stories are important, and even in that immediate aftermath of tragedy, people want to start telling the story. One of our important jobs is to listen and let them start telling that story.

That's powerful.

Yes, it is.

Was there any kind of training as a team for an event of any size of mass casualty?

Not really, no. I am so proud to say that—although I don't think anyone was ready for what happened—we were prepared. We didn't miss a call. We didn't miss a request. Our volunteers did what they had to do. Everyone had a different role. What I did at Sunrise was very different than what our volunteers did at Valley or at the scene. Everyone had a little bit of a different role to play. I don't know if you can be trained for all of that, I really don't. You just take it as it comes and do with it what you can.

In the days following, we were requested back to a lot of the hospitals that we responded to initially to debrief the staff; to talk with the doctors, the nurses, the people who were working that night because they need something, too.

How does that work? What do you say to them?

A lot of it is listening. They have their story to tell. A lot of what we do is listening. Especially after a tragedy, people don't want to be told what to do. They want to have a sense of control, and so we do what we can to give them that control. A lot of times they're looking for information to help them gain that sense of control back. This doesn't really necessarily apply to the doctors and all that, but the scenes definitely, One October definitely. They need information. *Is my loved*

one here? Are they alive, or are they dead? What's the next step? What is the role of the coroner's office? What are they going to do with my loved one? What happened? What next? Do we cremate? Do we bury? A lot of people just want information, but some people aren't ready for that yet; they just need that emotional support. No matter where anyone is in the hierarchy of needs in daily life, when something like this happens, they drop down to the bottom. What's important is their own safety, their own health and well-being. It's making sure they feel safe; making sure they're eating, drinking, taking their own medications; the basics, really.

Are you working with a lot of the funeral homes or the coroner's office in those decisions, the disposition of the bodies and all?

Sure, we definitely work a lot with the coroner's office. On most scenes that our volunteers are with, there is an investigator from the coroner's office that's there. We know the process of what goes on, so our volunteers are able to have those conversations with people on scenes so that the investigator can do their work. Did I answer your question?

Kind of, yes.

I forgot what the question was.

Those questions and getting the resources, how quickly can you get people to the resources to help them in those next steps?

We have a resource guide; it's fifty-two pages of information; everything from support groups, counseling services, a full list of funeral homes, what to do after someone dies, what to do with Social Security, credit cards, what is probate. That's really helpful. A lot of times people aren't quite there yet. They probably won't be there for a couple of days, a couple of weeks sometimes even. But just to give them that information so they have that. And that's another thing that we can help people with; when they're overwhelmed with all of these tasks that they now have to do,

we can help them prioritize what needs to get done today versus what can wait until tomorrow.

What did you learn about yourself?

After One October?

Yes.

I learned a lot, I really did. I was on autopilot for a couple of weeks, I really was. Myself personally, I worked my twelve hours with TIP at Sunrise, went home, took a two-hour nap, and then worked a twelve-hour shift at the coroner's office. I primarily did TIP after One October except for maybe two shifts at the coroner's office. It was something that I always thought about, *what if the worst happens and here my two roles intersect?* But they're very understanding of what I do here, so I was able to balance both.

But what I learned about myself is—there's a few things. I'd say about a week after, I started coming out of the fog. I have a stepdaughter who is fourteen and she knows what I do, but she doesn't really know.

What you do.

We had already scheduled, on the Saturday after One October, to go to the Ronald McDonald House to make breakfast for the people that were staying there. The night before she says, "Jill, we're still going to do that, right?" I was like—*my gosh*—"Okay, we'll do that and then we'll go ice skating or something." I learned that was good for me. I didn't think it was going to be. I thought, *I can only give so much and I've given my limit.* But it was giving in a different way and it was watching her, too, feel like she could make a difference because she said, "Well, what can I do? What can I do after One October?" We knew there were family members that were staying there that had people that were affected, so she felt like she was making a difference.

Then we went ice skating and I skated nonstop for about two hours around and around

and around. My husband stopped and my stepdaughter stopped and they were just sitting there watching me. He said afterwards, "You needed that. I know you needed that." And I did. I just needed to get it all out.

I didn't cry for probably two, three weeks. I couldn't. I had to keep it all together and do what I needed to do. But here is where I cried, and I'll probably cry of telling you the story. Two days after One October I got an email and it was from a high school student back east; she had just identified herself as such. She said, "Me and a few of my classmates figure your organization is probably really busy with 1 October and we want to do something to help. Can we send thank-you cards to your volunteers?" She said they had done a little bit of research and found our organization. I was so busy trying to catch up with emails, but something just touched me in that, like, *wow, someone clear across the country*. I said, "Sure," and I sent her a list of the first names of our volunteers so that they could personalize them. She sent me pictures of, "Oh, Thursday, me and my classmates are going to get together and write these cards." I just thought, *oh, that's really cool*. But when I got the box was when I broke down, because it was from Sandy Hook High School. All the kids that participated in that were either at the school or had siblings that died.

What did you do with the cards?

They were very personal. At our next continuing education meeting, we gave them out to the volunteers and told them the story of where they came from. There wasn't a dry eye in the room.

Oh, there couldn't have been. Is this an example of some thank-yous as well?

It is. It is. Cox Communications did this for our volunteers.

Did you correspond with the Sandy Hook connection?

I did, yes. She said, "That was just our way of..." Little did I know how much they knew about

what our city was going through, and so to read those cards, it was like, *wow*. She just said that was their way they wanted to give back.

How did you feel about Las Vegas when you saw the response?

I think the city came together. I think it really showed there's a lot of caring people, especially at the coroner's office, in my capacity there. People were dropping off food, just an overflow, an overabundance of things. I think they felt like this is my way; this is what I can do. I was working a shift and our security was a little tighter over that time frame, as you can imagine. We had an armed officer at the door for a couple of months after, and he had called us in the office. There was probably only two of us there. It was ten, eleven o'clock at night. He said, "There's a man out here with a box." It's like, *ugh*. "What kind of box? What does he have?" We were really hesitant to even go out there because who knows what's going on. He said, "Well, he's here with a couple of kids and they've got this box." We went out there and it was so touching because they had turned this cardboard box into this colorful...The kids had all drawn on it and made hearts and letters and well wishes and then they filled the box with treats. It was just really sweet. There's a lot of good people who just wanted to do something.

What is the process of taking care of your volunteers after—even the beginning of learning to do what you do, but then this magnitude.

We put great emphasis always on our volunteer self-care and making sure that they take care of themselves. Part of our training is going through that; what does your self-care look like? We do an exercise during our training academy where we have them write down the six most important things in their life. They think about it and they write down those six things. It can be people, beliefs, ideals, things, pets; whatever. Then we make them throw them away one by one. By the end of that exercise, there is people that are crying in the room.

We do that exercise for two reasons. The first is to show them that the people that we're out to be with, they didn't get to think about what their six important things were nor did they get to think about which ones they threw away. Their most important thing was probably taken from them, and we're there to support them through that. The feelings that we have about even just thinking about giving up what's important to us, magnify that by a hundred or even more, and that's what they're going through. But another reason why we do that is to figure out what their own self-care is. Those six items probably have something to do with their own self-care. So if it's someone who says, "Well, my health is most important; my morning jogging routine and eating healthy." Okay, that might tie into what your self-care is. When you have a hard, difficult call, you might need to go for a jog or make yourself a smoothie or do whatever you do. If it's family, it might be giving your loved ones a hug, spending time with them. If it's religion, maybe it's prayer, maybe it's reading the Bible or whatever else. I think that exercise really helps people figure out, too, after a difficult call, what am I going to go to that's healthy to help me work through?

After every call that a volunteer goes out on, they have to debrief that call with usually another volunteer who is kind of in a supervisory capacity who does debriefs, so they can talk through their call, they can just process it out loud with another person. If they want additional debriefing or if the person they're debriefing with thinks they need additional, then one of us staff members will also talk with them. We have a time during our continuing education meeting where they can share calls and talk about things learned and all of that as well.

After One October, we really amplified the support. At least one of us staff members communicated with each individual that was involved during that time frame multiple times. The continuing education meeting after One October, which was the second week in October, the

founder of our organization came in from Southern California. We had Mike Murphy, who is the retired Clark County Coroner come in. He's very motivational. He's a wonderful speaker. He came in and talked to our volunteers. We had the meeting at United Healthcare's corporate offices and they were so awesome. They had a lot of their employees standing in the doorways holding signs for the volunteers as they walked in. Since then, we focused on self-care at I want to say probably three of our continuing education meetings of different methods that they can use. We had Love dogs that came, pet therapy. We had someone talk about Heart Math, which is a deep breathing technique. Someone else talk about tapping. There's something for everyone, but not everything is for everyone, so we like to put out what there is and hope that the volunteers find that.

I think when I went to the city council meeting, the fire chief was there to thank TIP for helping firefighters.

That was in December, right?

I think so. I'm not even sure. Tell me what kind of care you gave to the fire department.

After One October, not really anything because they have their own support. But, like I said earlier, we do a lot of education with them and on occasion when they do need additional assistance supporting their crews, we will do that. Back when I started with TIP, they really didn't have a program in place for their own employees. I am so happy to say that over the years they've seen the need for that and so they did hire someone about three years ago who is their crisis intervention administrator and she has developed a program and a peer support team and they really do a lot of work. We work closely with her to support each other and any efforts that we can do. For a long time before she came the firefighters, especially here at Las Vegas Fire and Rescue, knew we were here, knew we were here to support them as well, and used us. Our

main focus is the community.

We did have, I would say, about five years ago a couple of fire chiefs say, "Teach us; show us what you do for the community that we can do for our people." We do have a program called ETIP, which is emergency responder training. It's a program that emergency responders can go through for their own peer support because a lot of times whether it's fire department, police department, they don't want to go outside of their own people for support, so we teach them how to support each other. We do have programs for that.

That's good. That's good to know.

In your job you see a lot. Over time what do you think about guns? Have those opinions changed at all, pro or con?

I'm not a very political person. I don't think my opinion has changed. I think whatever my opinion is doesn't matter, anyway, because almost too little too late; they're out there. It would kind of be like prohibition. How can you take it away now? You know what I mean?

But I wanted to hear it from you. I think that's important because you see more than most of us, especially with the two jobs.

Yes. There is a higher amount of suicide than people ever have any idea. It's huge. The number-one method of suicide is gunshot wound. But on that same realm, if there is a will, there is a way, and I feel like if they didn't have access to a gun, a lot of them would still find a way. Where it's sad to me is with kids, when a child gets ahold of a gun.

This was fabulous. Thank you so much for sharing.

I do have one more thing. One of the things I found out from different groups, professional groups—and you mentioned the Sandy Hook kids connecting with you—were there other professionals in a similar trauma service that reached out to you or have you found reason

to reach out to other communities?

I think that this incident did cause a little bit of collaboration, which is good because you had organizations that maybe don't usually work together on a day-to-day, but something like this happens and it's all hands on deck; let's see what we can do. I'll be honest. There were some frustrating times when our phone is ringing off the hook with people wanting to help, but we don't know these people. I can't send them out on a scene. My encouragement to them would be, "Go through our next volunteer training academy and then you'll be able to help." But there were some really persistent people. "Well, I have a background in social work and I can help you. Put me to work." Well, I can't. There was some of that. I think a lot of people just had that need to do something. *I need to help; I need to do.*

Did you get a lot of volunteers afterwards?

We had probably two hundred people offer interest in being a volunteer, and so we just had a volunteer training academy in February and we had to do a little bit of a different process with how we were going to let people into this class because we had so much interest. We did send out a survey in advance to figure out: *What is this person's intention? Why do they want to help?* Unfortunately in this line of work, you do have some people that, oh, it's cool; it's CSI; I want to go on a crime scene. We have to sort through those people and make sure that who we have on our team has pure intentions, and so that helped doing that survey. We came out with a really great class. We have twenty-four individuals who are in field training right now and they're doing a great job.

That's good to hear. I thank you very much.

You're welcome.

This was very informative.

I'm glad it was.

I think others will learn from this as well. I'm glad to know you're here.

I remember the first call that I went out on and I remember walking away thinking, *what would these people do without someone?* Not me, but just someone to answer those questions and walk them through the process and just be there, really. Every person in the fire department, police department has a great heart and compassion because they wouldn't be doing their job if they didn't, but they don't have the time to sit with someone and listen and hear about what they made their loved one for dinner the night before and how they met and their love story, and we do and it's an honor to do that.

That's great.

That is wonderful. Thank you.

[End of recorded interview]