

Interviewee: Don Knutson

Interviewer: Rachel Knutson

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Abstract: Don Knutson is the Rescue Squad Director for the Village of Colfax Wisconsin. In the interview, he goes into detail about his job and how it changed because of Covid. As he has taken care of patients that go by ambulance but as a director and how he has seen things change in the profession. He also is the health advisor for the Village of Colfax which was the main source for the community. While he also shares how his work life has also affected his personal life because of the added reasonability from Covid. Finally, he comments on how the political atmosphere has affected the pandemic.

Rachel Knutson 0:06

My name is Rachel Knutson. It is November 29, 2021, and it is currently 8:24 pm. The current cases of COVID in the US are 48,106,615. The total deaths in the US are 776,070. In Wisconsin, the total cases of COVID are 864,190. The total deaths in Wisconsin are 8,964. In comparison, the cases of COVID and California are 4,780,867. The total deaths are 73,365. And currently, the total US population is 59% vaccinated. So, to start out, can you introduce yourself and what you do on a day-to-day basis.

Don Knutson 1:11

My name is Don Knutson ambulance director in small rural Western Wisconsin town. I'm also a contact tracer for Dunn County, Wisconsin.

RK 1:21

So, to go into a depth a little bit more about your job, what do you do on a normal day?

DK 1:28

Treating patients in the ambulance, ranging from COVID patients to generally ill or trauma patients, as well as running the ambulance service, billing, scheduling anything that a regular business person will do.

RK 1:47

All right, and you said you lived in Colfax and as a small community. Do you know about what the population and like what it's like to live in that type of small community?

DK 1:55

It's a small community about 60 miles from Minneapolis, where populations by 1100 people, but our ambulance district serves about 9000 people because it covered the rural area around Colfax. Small town, you know, people know people. That's the interesting part, the County Health Director jokingly says, I know everyone, that's not true, because I've been covering the entire Dunn County region. It's beyond my normal small community that I do cover. So, I have talked with people from all around the county.

RK 2:38

All right. So, when we all first learned about COVID-19, you've probably heard about it a little bit differently, as you were in the medical profession, what were your thoughts about it when you first heard about it coming to the US and your community?

DK 2:54

Well, actually, my first thought was, I had just came back from a vacation in Florida. And I had the world's worst cold. And I wondered if I had COVID. But at the time, no one really knew anything about it, the doctors, they had no test for it. And so initially, it's like, okay, it's something that's not going to happen much here. until about a month or two after I got back from vacation, then all the health department warnings. CDC, Wisconsin Department of Health, started sending a bunch of warnings down. And I also functioned as the health director for the Village of Colfax. So, it was my duty and responsibility to share that information and guide the village in how to handle COVID.

RK 3:47

So, by what you're saying your job has changed, or has been adapted to COVID, were these changes difficult to make, or were they something that you saw yourself easily doing?

DK 4:01

Well, it started the first part of the year just as an ambulance, emergency medical technician, the community, the communities slash countries shut down for COVID. And when they shut down, our cases were fairly low to moderate. But then in the fall, the year when the country started opening up, the area started opening up, our cases started going through the roof, where we were

on a regular basis hauling COVID patients to the hospital. And that's when I contacted the health department see if they needed help contact tracing, because that was the only prevention measure that I could partake in as a EMT community member. And so that's how I got into contact tracing when the numbers went through the roof in the fall of 2020.

RK 4:57

All right, and did you find these changes in your community very concerning seeing all these cases going up and seeing all these people just getting sick.

DK 5:10

Yes, I believe we had the first transported case of COVID out of Dunn County in our ambulance. And when I had to call my crew and say, "Hey, you've been exposed", everyone really was shocked. They didn't know what to do, because it was the first case. And so we kind of went through some growing pains on. We took it very seriously, we still do. But we don't have the panic that we did in the first part of the year last year. We -Yeah, that's a big thing. I think we're no longer panicking. We realize this out there, we realize it still can be deadly. But there's immunizations, there's monoclonal antibody treatments, there's a demo sphere, there's different treatments we can use to lessen the effects of COVID.

RK 6:10

Alright, and was going on some of the panic that you were experiencing what was more like that panic in that first couple months where you were having to adapt your ambulance service for a pandemic like this?

DK 6:28

Well, we had to rethink some of the things we had before. I mean, we never really wore gowns on calls now we wear gowns on a regular basis, N-95 masks. The thought of literally sterilizing the ambulance on a regular basis with antiseptic that was really hard to find last year, we had to think outside the box, different suppliers, I was going to third, fourth, fifth suppliers to find disinfectants and PPE for the EMTs. I had to start ordering supplies, based on a month, two months out instead of a week that I normally would be supplies just where we had to reuse mask we had, you know, the tech college universities, and some local businesses, they donated whatever they had for masks and gowns. Most of them worked. Some of them were kind of interesting, especially when it came to gowns, some of the stuff that was donated. But yes, we appreciate the community stepping forward and donating stuff. I know the Technical college emptied out their entire cabinets of PPE for ambulance services.

RK 7:51

It's great to hear that you're having these great connections with outside sources, and just kind of going more into how you're seeing COVID-19 affecting people do you see like mental effects of these people or just the physical effects that the community is having about this?

DK 8:07

Well, right now there's, I can see two or three different effects. The first one irritates me, people have made COVID a political issue. It's a health issue. Should be no politics-there's politics should not be a part of this. The second part is I guess there's so many people that are I don't know if it's the political side or whatever, the anti-vaccineing versus vaccination. And then I've had some through my contact crazy, and some people that still don't believe COVID is real, that it's a it's a made up disease. And I just can't believe people do not believe in science.

RK 8:55

Yeah. Um, so you're talking about kind of the political aspect of it. Do you think that the national government was doing the correct actions? Or have you seen a change in the national government that you've been more acceptable for just because you are working in the field that you're working with these patients firsthand?

DK 9:16

The two things with the national government, one, initially, the political landscape that put forth cures or treatments that were not proven in science, such as injecting bleach, putting lights in the body, I think, really hurt any effort to control COVID or delayed it. And now there's so much doubt and so much misinformation out there. People quite freely doubt the media. I've told people that I contact trace one I'm only going to tell them what's in the science not the social media stuff. But by the same token, I also encourage them to do their own research from good, solid, reliable sources.

RK 10:10

And what are those good, reliable sources in your world? Is it? Do you find news platforms? Or what type of sources are we looking at?

DK 10:18

Oh, I believe in a couple things. One, you got to believe in CDC Department of Health. They, they deal with numbers, and I trust their numbers. I don't think they're gonna mislead us. But then I also like anything from college students research and papers, you need to look at very, very, very, varied resources, and then draw your own conclusions. So you may have to look at some liberal, conservative and read many sources and just make your own opinion.

RK 10:51

Right. And so kind of bringing it back to a little bit were local, you said that you worked for the health advisory for the township that you work for? How did your local town handle this, like government wise? How did the political sphere in your small-town work?

DK 11:07

Initially, they bought into it, a lot of people did not like mask, a lot of people still don't like masks. They social distance, but the longer this this has go on, the less they want to mask up, the less they want to social distance, they want to get back to normal. And I appreciate you wanting to get back to normal. But I still think people need to take this seriously. And if you do the social distancing, wearing the mask, washing your hands, get immunized. Hopefully we get through the pandemic in a much shorter timeframe than if we don't do anything.

RK 11:51

And then just kind of branching it out. Because you obviously work with a lot of different people as your head of the department and stuff like that. How did you work with like county or like state governments? And did you work well with them and as you contact trace, obviously worked with them to like did the state and more county governments help you a lot.

DK 12:14

The form that we fill out for contact tracing is technically a state form. And the Dunn county health department works regularly with the State Department of Health. On the EMS side Department of Health, we have a town hall meeting usually monthly, and they give us updates as well. You know, and we've taken some advice from them thought outside the box regionally from different EMS services. Such as you know, two years ago, I would never have thought of buying a paint sprayer and misting down the back the ambulance down with alcohol or antiseptic. That's now commonplace. In fact, a month before I bought our paint sprayer, it was lit- the literal the unit was a Wagner paint sprayer. The month I bought it, it was then labeled as a disinfectant sprayer, same unit, same model number. But everyone's thought outside the box and found quicker, more efficient ways to keep everyone safe.

RK 13:22

All right, so kind of bringing it back to like the bigger community. What have you seen within your community as obviously you do other things within your community to in your day to day life? How have you seen going to the grocery store? Have you seen the community partake in social distancing? Mask? How did you see the community react in your daily life?

DK 13:44

Initially, the first year, first half a year. The community was very great about social distancing wearing mask and any red-commercial facility. Churches either were totally closed down, went to virtual meetings, virtual church services. I think it was well received. I mean, in a small town, I never thought we'd see a drive in Christmas Eve service. Last year, we had a driving Christmas Eve service attended by over 100 people from many different churches. You know, the tendency is as this draws out is how we don't have to do this. We've been immunized. We still need to take precautions. We're at a critically high level in the county right now. And if we don't continue to try to keep these practices in place, I don't know what goes after critically. I don't even want to think about that.

RK 14:46

Yeah, um, so how you're describing it. The community has come together to build these like new type of things for our community. Have you what other things has the community developed to combat COVID.

DK 15:00

Well, let's see, we've, I think the biggest thing I think is here to stay is virtual meetings, virtual get togethers. The nursing home when it was locked down, they had a couple computers. So residents could zoom in, zoom isn't a general term, to their friends and family or they the airlock between rooms, they make appointments and family could talk through glass just to keep the human connection going. I I think there could be a lot more things, but I don't want to see businesses closed down. So we have to find a happy compromise. And I think fortunately, small towns, we've been able to do that. A little easier than big towns that have you know, big concerts, big malls. We're a small towns, we don't typically have a large group in any one place at any one time. Short of basketball games. Last year, we didn't really have basketball games or football games, and this year, they are back to non-limited attendance and you're seeing COVID numbers in schools go up.

RK 16:19

So kind of going on to more of your personal life. How have you seen your life at home change due to COVID?

DK 16:34

Oh, that sounds strange. I've always been married to my work. But I my EMTs that I have for employees are now having mandatory overtime because of a shortage of workers. So their volunteer time with me has been limited, which means I have to pick up more shifts. It's not uncommon for the last six months, I've been putting my 40 hours in on call another 100 150 hours a week. So, I stressed my family because I'm just not able to go out and do things like I'd like to do with them.

RK 17:12

And do you think your family has handled that? Well, too? Have they been welcoming and understanding to this type of thing?

DK 17:19

I don't know if it was necessarily the same welcoming, but understanding. There's been a few times that the quote unquote, how can your work, screw you anymore? Has come up more than once. Unfortunately, well, I guess fortunately, my wife married me. I was already doing this job. So she knew what she was getting into. And she married me and. And my daughter, she grew up with this. So she's pretty used to me running out, getting up middle of things and leaving her.

RK 17:59

And so you said that you're you're working a lot of hours because your employees are other places. How have you seen the field of EMS like employment wise look,

DK 18:09

I have not seen in 31 years as an EMT. This view of EMTs out there. I went to a job fair two weeks ago, I think I only had eight people come up to me and ask about employment. Local Technical College, next semester only has four people enrolled in the fire medic program. There's not an ambulance director that I talked to that is not short-handed right now. Back I was talking to a neighboring director earlier today about possibly starting early talks about merging services that will possibly merge three services in our county into one.

RK 18:58

And is this because of the economics? Are people just not wanting to go into the field because of disease or why do you think this is happening?

DK 19:07

Oh, there's one EMS is a very poorly paid profession. Second is I know there's some people that have opted not to be vaccinated and the requirement of vaccines have dissuaded people out of health care, which I don't understand. If you're in health care, you should be a science believer and the people that are opting out of healthcare because they don't want to get immunized. I get personal choice but I also don't understand why you don't want to be immunized. This is not a brand new immunization. It's one that's been around for 20 years start with the SARS COVID. I mean the SARS bird flew in for 20 years ago so I mean it's just tweaked a little bit. This is not a brand new immunization and. The other thing is a lot, a lot of hours in our service the most people work 2,3,4 jobs and then have a family. So unfortunately, the volunteer the minimum wage, EMT job is gonna take backburner to any other job.

RK 20:24

And so kind of going back to your family, and how that all cooperates, how have you, like interacted with friends or family that isn't just in your house that you live in?

DK 20:39

We haven't been out a lot. I mean, summertime was great, because you can explore social distance outside less likely to spread, but we really have not went to many parties. We've kind of stayed amongst our own internal group, so to speak, fam family group. It's just even our small community get together, the local parade, firefighters get together. This year they had a year ago, they didn't have it this year, they had it. And the attendance I thought was far less than what it was in the past. So I think people are still taking this somewhat seriously in that trying to avoid large large crowds. But then, again, one of my contact tracing months ago, asked if he'd been any place to travel anyplace. And he'd went to a college sporting event. And jokingly said, "Would you like me to give me a name of 80,000 people that I was associated with?" And it's like, no, I really don't want to do that. But so there are still large crowds, just not locally. And as far as you know, myself, again, we're, we stay kinda to our nuclear group, and we don't venture out much.

RK 22:13

And you've been talking a lot about vaccines, and I can definitely tell that you're for vaccines. Do you think the community that you're in is open to the idea of these vaccines? Or is the community kind of struggling with that

DK 22:28

5050

RK 22:30

5050? On that,.

DK 22:31

Yeah, you got to judge who you're talking to before you express your opinions to be politically correct and safe nowadays, or you'll get into discussion you probably didn't plan on getting into.

RK 22:48

Fair enough. And is that the county that you're around? Have you? Have you seen numbers that are promising or?

DK 22:57

our county vaccination rates are far below other counties. And I don't know if it's just the dynamic that we're close to Minneapolis. We have a lot of bedroom community. Our COVID numbers have mirrored western Wisconsin, so it's not like we're a unique County. But I know our immunization numbers have lagged off ever since the immunizations have started.

RK 23:31

Have you been seeing a easy access to the vaccines for everyone? Or is it struggling? How are you seeing the vaccines being given out? Good, bad.

DK 23:42

We have three major health care organizations in the area. And they've been very proactive, notifying people clinics that they can come in and be immunized. Our health department's had walk in immunization clinics. They've had pop up clinics that have happened in small towns in the area. And I know we were kind of late in our small we hosted one pop up clinic. And we had a hole in two hours. We had a total of five people that walked in. And I don't know if it was just late in the year in September, people were already immunized or people just didn't want any

immunize I don't know. But we we did offer a local clinic on a beautiful fall day. And the state of Wisconsin's offered was \$100 gift cards. We had state incentives. When they did another local town that he had got backpacks for schools, which was like August. So there have been little freebies that have been Given out, trying to encourage people, but I don't think those incentives really make much difference people have their mind made up one way or the other. If they're don't believe in immunization, they're not going to get it.

RK 25:14

And as you're working with local communities, how do you see this community coming out of the pandemic? And kind of how do you see the future of Colfax?

DK 25:25

I don't see it changing a whole lot. The only thing that does concern me is, through the course of history, immunizations been good. They produced a lot of diseases. And I am just nervous that with this 50/50 community right now, that the days of like when smallpox were eradicated, so many other immunizations, that people are just not being immunized for anything, and there's gonna be more pandemics on a regular basis. And that's my biggest fear.

RK 26:04

And statewide and stuff like that, do you think the government is going to come up with new ways that are going to help combat your fear? Or do you think there's just nothing you can do about it at this point,

DK 26:20

I would like to think government could come out. But again, this country is the most polarized I've ever seen it in my life. Only 53. But I'm afraid with the polarization going on right now. The calls for my rights, my freedoms, instead of what's good for the region, or my neighbors. It's all about me. I just have a hard time believing that any government mandates are going to carry any weight anymore. I think we're doomed to happen pandemics.

RK 26:55

And that would be a scary thought as an EMS, do you think that's going to be something you have to continue in the future? Or how do you see the field of EMS having to change because of this possibility?

DK 27:07

I think there's going to be more negative pressure built into ambulances, ambulances are already being built with UV lights in them for self-sterilization. I think it's gonna be more common to see EMTs paramedics arrive what masking gowns on. But the other side effect that hasn't been mentioned here is with this pandemic, be it either COVID is filling the hospitals or people put off going to the hospital because they're afraid of COVID and they're getting sicker. Hospitals have reached their maximum capacity. Again, in 31 years, I've never had to look at the we have a board in the station telling us what hospitals can accept patients at any given time. And you know, a patient may want to go to hospital A, we may have to tell them, Well, we can take you there but there's no rooms you're going to be transferred out. And or we can take you to hospital B where there's a bed, and a patient's going to have to choose if they wait or get transferred. And people have been transferred multiple states away just because that's where beds are.

RK 28:29

And does this concern you that these hospitals are going to continue to be filled for long periods of time? Or do you see an end to these hospitals having these beds filled?

DK 28:40

Yeah, as of right now, I do not see any lessening of the bed availability. One hospital actually has converted half their ambulance garage into hospital beds, they have some beds in their ambulance bay to handle an overflow. Today when I left work, two of the regional hospitals had emergency room divert, which means they did not want any patients coming to their emergency room. And the other hospitals they had I think it was showing no med surge beds or med surge capacity, which meant a person came in with appendicitis would not have a bed because they're all full and talking to our medical direction team. They had a fairly critical patient they had to fly out in the past couple months to Iowa which is next state over but to get care because they had no room in the inn so to speak. So people are flying to North Dakota, South Iowa, Illinois. I was talking to a local aero Med Service couple weeks ago. And they're flying in the hospitals they've never flown anyone into before they flown people out. But they've never flown them in, because they have beds. So that's a side effect. I can't blame it all on COVID. But I've never seen hospital capacity like it is right now.

RK 30:25

That's just a scary fact that we're having to avert these people to different areas. And that's time that they could have had care within local range, too. So how how, how do you see your life in

the future going like what do you see in the next year? Or how do you personally see your family's life going forward?

DK 30:47

I do not see COVID disappearing. Last weekend, the new variant coming out of South Africa. The good news, it's sounds milder, but it's more contagious. And they're skeptical if the vaccines are going to work on it. I'm hoping they will. Because my experience with a vaccine or people typically are having less critical symptoms. No vaccine is foolproof, he can still get it but at least their symptoms are milder. And so my, how I see my life, I expect for the next year or two COVID still going to be prevalent. We're going to be still masking up gown up sterilizing. sterilizing an ambulance takes a half hour to an hour to do a good job that you're out of service doing that. There have been times we've left the ambulance halfway done because we're paged out for another call and have to come back and finish sterilizing it. We've had, we're relatively small service 500 calls a year, we've had three back to back COVID patients, which is kind of rare. So you basically get the ambulance sterilized, it goes out, you sterilize it, again, it goes out you sterilize it again. And I don't know how ambulances are built for that. sterilization, I don't know if that sort of long term is going to shorten their lifespan. And the other I don't know if it's COVID related or what, but the economy has also changed to the point. ambulances and fire trucks have increased tremendously in their price over the last six months. So my ambulance which probably six months ago to probably be 215 - 220,000 to replace is now pushing 250,000 to replace. And it's just financially hard to set aside or plan for a future purchase when prices are going up that fast.

RK 33:10

And do you see your wife daughter and you doing going out into the community more going out on adventures.

DK 33:17

I see us going on an adventure may not be as safe as it used to be but I still think it's good for the soul good for the psyche just to try to keep some semblance of normalcy or the old normal. I don't know we'll ever be back to the true old normal. I think you're going to see mask maybe not worn by everyone but you're going to see mask out in public intermittently. And people aren't going to look at them funny like they did two years ago if you wore a mask out, they kind of got a look that either they probably had cancer and were super immunosuppressed or they're from another country. That's typically when he saw people with masks. And even our small town I was in the grocery store last week and saw five six people wearing masks, which is great. I'm not going to follow them by respect people's space, try to give them space in lines and not crowd. I

think people are trying to do the right thing. But everyone's opinion what the right thing is, will differ.

RK 34:34

Very true and that's all I forgot what I was going to do anyway at the end so well thank you.

DK 34:52

You're welcome.