An Open Letter to Salt Lake City Firefighters from Mayor Palmer DePaulis

Thank you for serving our City well during the catastrophes of Wednesday and Thursday, January 2 and 3, 1991. I realize the strain put upon you was great. I understand that several companies responded to the terrible multi-vehicle accidents on 1-215 and Redwood Road, working for several hours in sub-freezing weather. Because of the scope of the accident, hundreds of people were personally affected. A close friend of mine, William Alan Boes, was one of the four people killed in the accident. Just hours after completing work at the 1-215 sites, these same companies responded to a three-alarm blaze at the Roosevelt Apartments, which left 80 people homeless. Battalion Chief Gordon Nicholl tells me you were up for more than 24 hours, but that you never let down.

Unfortunately, the early days of 1991 brought with them tragedy and grief. But, through your efforts, they also brought our citizens renewed confidence in your ability to help when it is most needed. The role you play to help safeguard our city is a difficult and valiant one. We all rest easier knowing you are on watch.

From all of us, thank you.

Official Rumor, Vol.9, No. 8, February 1991
8 Firefighters Become Lieutenants

Eight Salt Lake City firefighters were promoted to the rank of lieutenant during a brief ceremony at the Public Safety Building.

Two of the new lieutenants Reinhard Kauffmann and Kriss Garcia, were also recently named the Firefighters of the Year by the Salt Lake Eagles club.

The other new lieutenants included Thomas Pace, Dennis Goudy, Fred Anstee, Jeffery Forrey, William Miner and Richard W. Berrett.

The new officers have an average of 12 years service with the department and were picked from 88 firefighters who took the lieutenant's exam, said fire Battalion Chief Gordon Nicholl.

"These guys have been through a rigorous testing program to get to this point," said Chief Nicholl. "It's been damn tough on them." Lts. Kauffman and Garcia were cited as Firefighters of the Year for their work with underprivileged children in the Rose Park neighborhood where their fire station is located. The pair have also worked several years providing meals and Christmas parties for the homeless, Chief Nicholl said.

During the same ceremony, Blaine Collins was promoted to Fire Code Enforcement Supervisor.

The Salt Lake Tribune, Friday, January 18, 1991

Firefighters help in battle against muscular dystrophy

Helping Hand

For nearly 10 years, Salt Lake City firefighter and paramedic Barry Bonham has volunteered with the Muscular Dystrophy Association. Locally, the firefighters were the first group to help the association as it came into being.

He helps coordinate events for the agency—first locally and now statewide as events coordinator for the International Fire Fighters. He leads a Scout troop that has a member with muscular dystrophy. His knowledge and experience allows him to deal sensitively with special needs.

"Barry is a gentle person who cares about people and he has a good sense of humor. He arranged to bring a fire truck to summer camp; it was a hit with the children there," said David Ricketts, patient services coordinator.

The firefighters recently raised funds to buy a motorized hospital bed for the association. The bed is being loaned to a woman who has little mobility.

Bonham has seen progress in MD research. Ten years ago, little was known about MD and approximately 40 related diseases. Today, gene identifiers have been found for certain types and experimental cell transplant therapy has been approved for a few cases.

The Salt Lake Tribune, Friday, January 18, 1991
Massive Smashup Kills 3 On Foggy Utah Freeway
NORTH SALT LAKE - Three people were killed and 18 injured Wednesday when dozens of cars and at least 10 semi trucks rammed into each other in dense fog on a half-mile strip of Interstate 215. At least 52 vehicles were involved in the accidents, which ran from Redwood Road to Interstate 15. Eighteen people were injured in the I-215 accidents. Three were listed in critical condition late Wednesday. A number of other accidents were also reported on a foggy Redwood Road area near I-215.
Salt Lake Tribune 1/3/91

Downtown fire leaves 80 without homes
Dozens of people were left homeless by a three-alarm fire that destroyed the Roosevelt Apartments in downtown Salt Lake City this morning. More than 91 firefighters worked through the night, finally containing the blaze at 6:30 a.m. Fire officials estimated the damage at $1 million. The cause is still under investigation. It was the second time in six weeks that a fire of mysterious origin forced the tenants of the Roosevelt Apartments to the street in frigid weather.
Deseret News 1/3/91

TEEN DIES 4 HURT AT CONCERT
One teenager is dead and two others were in critical condition Friday night after suffering full cardiac arrests at the Salt Palace during a concert by the rock band AC/DC. In addition, two other youths were injured at the concert. A female teenager was taken to LDS Hospital after being trampled close to the stage, according to a Salt Lake Fire Department official. One youth reportedly suffered head injuries when he fell 20 feet from the second floor of the Salt Palace into a fountain at the southeast corner of the concourse.
Desert News 1/19/91
THE ROOSEVELT
256 EAST 300 SOUTH

WHAT HAPPENED? WHAT LESSONS DID WE LEARN?
By STEPHEN HIGGS, B/C

As a Training Officer and Department Safety Officer, I found the Roosevelt Apartment fire very interesting as well as demanding.

The Building

The Roosevelt was built in 1929, this central hallway apartment was typical of ordinary construction, (unreinforced masonry bearing walls, wooden floors and wooden flat roof). The Roosevelt measured 180' x approximately 50' (See Fig. 1). The structure was three (3) stories in height with a basement. Three stairwells, front, center and rear were originally open prior to Chapter 13 renovations. The center stairwell terminated at the roof with a stairwell penthouse for roof access. In the early 80's, plagued by flat roof water problems, the owner built a lightweight hip roof over the existing flat roof. This new roof consisted of 2 x 4 trusses (hand made to engineer spec.), 24 inches on center with 1/2" plywood sheathing covered with felt and asphalt shingles (See Fig. 2).

The Fire

On January 3 at 23:51 hours Dispatch received the initiating phone call for a fire at the Roosevelt Apartments. At that time, dispatcher could see fire through the roof. The apartment manager claims that as early as 23:30 hours smoke detectors were sounding on the Third Floor. Upon investigation the manager opened the center stairwell door on the Third Floor encountering a wall of flames.

Once again, due to a delayed alarm, fire conditions were well advanced with fire in the cockloft as well as the void created by the lightweight hip roof, as evidenced by fire through the cockloft vents and the lightweight roof prior to the first alarm.

According to our investigator, the fire (suspicious in origin) started in the center stairwell on the Third Floor. This stairwell pierced the cockloft and terminated at the roof with a penthouse. The stairwell penthouse had been covered with the lightweight roof. This construction allowed fire to rapidly enter both roof voids. Continued on page 10

LESSONS FROM CHAOS
By Captain Gene Miner

How could anyone ever hope to learn anything from a state of unorganized confusion? I don't believe that it can be done if you choose to attempt it while in the eye of it's existence. Take the recent AC-DC Concert for example. As the Incident Commander, I was overwhelmed when faced with three full arrests while surrounded by fourteen thousand screaming fans and a band whose volume was thought negating in itself. I had three patients, one Paramedic and the few Emergency Medical Technicians the Salt Palace had left to assist; supportive rescue units were summoned and the patients were all delivered to the appropriate hospitals but the lessons learned were not evident until the incident was reviewed.

A negative critique was selected as a review format for a couple of reasons. In a positive critique you learn that everyone did a good job but protocols were not followed and the expected result was not reached. Taking the opposite tack allows focus on violation of procedure and policy. This gets to the problem areas of the incident and allows for correction and future remedy. There is one important factor that must be implemented to make this approach work. The critique must be impersonalized.

If you combine the positions within the Incident Command System and the negative critique, every person present can feel good about voicing their opinions and observations because they will be attached to a position rather than a person. It's true that the person in the position may be known but their name is not directly attached. We are all adult professionals. If we can't accept constructive criticism, we won't learn. We then become stagnant. Let's take this back to the critique that took place after the concert.

It was found that one of the first mistakes made was by Command. The Incident Commander triaged the patients, intubated a patient, directed ambulance crews and assigned hospitals. This was done while attempting to find a quiet place to work. Command protocol was violated. Once command was established, the commander should have stopped any other function involvement. The Paramedic should have been given the triage and treatment sector. The Gold Cross Supervisor should have been assigned the transportation sector and Salt Palace Security should have been instructed to control the crowd and the band. As each rescue arrived, they took a patient and everything ran smoothly from that point on. The chaos came from attempting to operate with four or five different entities that had an organized structure of their own. The sad part of this incident is that the patients involved had no chance of survival by the time they could be treated. continued on next page
Lessons from Chaos continued:
The example shown here leads me to believe that if the existing command system is used and can be augmented with an impersonal critique after the incident, we will learn from each incident, feelings won't be hurt, and we will better use the resources available to us in the field. We have established a greater working rapport with all the agencies as a result of incident 91002116.

EMS NEWS

Providers to Advise of 'Medical Miranda'

HEALTH CARE provider organizations are being ordered to advise patients of their rights to refuse care and to name proxies in case they become incompetent.
The so called medical Miranda warnings, explaining state law on living wills and durable powers of attorney for health care, will be the responsibility of all hospitals, nursing homes, health maintenance organizations (HMOs), hospices, and home health care agencies who want Medicare or Medicaid reimbursement as of November 1991.
Officially known as the Patient Self Determination Act, the law was part of an omnibus budget bill passed last November. It requires that providers
• Maintain written policies on refusal of care and advance directives
• Give this written information to adults at the time of admission as hospital inpatients or as residents of a skilled nursing facility, before coming under the care of a home health agency or hospice, or upon enrollment in an HMO
• Note in patient records whether an advance directive has been made
• Ensure compliance with advance directives, consistent with state law
• Provide both staff and community education on advance directives.
"A lot depends on what each facility does to educate its staff and community," says Fenella Rouse, executive director of the Society for the Right to Die, "but we have positive expectations that it will be done well in most places."
Rouse says the law will "normalize discussion of these issues in hospitals, hospices, and long-term care facilities. Not just the admission clerks are going to be told about this, but everybody, because once you get that paper on admission telling you about refusal of treatment, it will become a subject of discussion throughout the facility."
Both the states, whose laws on the subject vary widely, and the US Department of Health and Human Services (DHHS) are responsible for providing health care organizations with the pertinent information. (The DHHS' Health Care Financing Administration has been assigned the task, but at press time had not yet worked out details.)
The American Medical Association (AMA) is developing brochures for both physicians and patients, says David Orentlicher, MD, JD, ethics and health policy counsel in the AMA's Office of the General Counsel. And it is working on a model advance directive form that is designed to be valid in every state. One such model has already been described (JAMA 1989;261:3288-3293). There also is an AMA Ethical and Judicial Affairs Council report (JAMA 1990, 264: 3133).
The American Hospital Association plans to distribute to its members by March kits with "great detail" on how to comply with the law, "not just the legalistic requirement but for the whole area of living wills and advance directives," says spokesman Bill Irwin.
"As we used the (Nancy) Cruzan (US Supreme Court) decision, we are using this as another means of public education on the whole area of living wills," says Irwin. "With every opportunity that arises, tens of thousands of people suddenly get interested in living wills."
A North Carolina Hospital Association survey found that 12 of 56 members already routinely ask about living wills.
Some HMOs are also already meeting the requirement, says Leslie Rose, legislative director, Group Health Association of America, an HMO trade group.
The association is asking, though, that the regulations for implementing the law allow notice to be given at the time people become members of HMOs, and not during marketing, she adds.
"It would not be helpful to have to say, 'Hi, do you want to become a member of an HMO? We emphasize preventive health care but just in case you become a vegetable, sign this for us now,'" says Rose.
Still there is consensus among providers that "it makes more sense to let people know of their rights now as opposed to when they are in the hospital emergency room," says Rose. The HMOs that already have advance directive programs in place stress that physician training is of paramount importance, she adds. "It's one thing to have all the literature, it's another to have providers who understand and think about the issue and how it is presented to patients," she says.
Education of physicians and the public was stressed at a recent National Health Lawyers Association colloquium on autonomous health care decision making under the new law.
The physician's role in helping
patients decide whether to sign an advance directive saying "Yes, I want to be hooked up [to a life-support system] or no, I don't," is paramount, yet "many physicians are unaware of how to talk to patients" about the issue, says the lawyers' spokeswoman Ann Suydam. The man on the street also often does not know what a living will or advance directive is, how to get one or what to do with it once they do have it," says Suydam. "Of the few people who have a living will, many put it away in a drawer somewhere. If the doctor, lawyer, or family doesn't have it, it's not going to do a lot of good."

Also buried in November's budget bill was a provision that will help protect physicians' due process rights when hospitals are accused of "dumping." Medicare peer review organization (PRO) physicians, who have been allowed only to review records in such cases, will help assess the medical justification for allegedly improper transfers of medically unstable indigents. The new law requires the PRO provide the accused physician or institution with "reasonable" notice of the review and opportunity for discussion. The accused can, in turn, submit additional information to explain extenuating circumstances before the PRO makes its recommendation back to the Inspector General of the DHHS.

So physicians who are under investigation "will enjoy more due process, dialogue, and exchange with true peers than they have had in the past," says Lisa Looper, associate executive vice president of the American Medical Peer Review Association. The standard for imposing civil fines for improper transfer is changed under the new law from "knowing" to "negligent" violation and the standard for excluding a physician from the Medicare program because of improper transfer is changed from "knowing and willful or negligent" to "gross and flagrant or repeated" violations. Termination of a hospital's Medicare provider agreement as an enforcement option is eliminated. The law also expands whistle-blower protections to apply to physicians.

New PSOB benefit to be available soon.

The Department of Justice has announced that it is working on regulations implementing the expansion of the PSOB program enacted last year by Congress. Under the new law, firefighters who are permanently and totally disabled in the line of duty are eligible to receive the PSOB payment, which previously was available only in the case of line of duty deaths. Although the new law is in effect, no payments can be made until regulations have been finalized. Once finalized, the benefit will be available to public safety officers injured on or after November 29, 1990. The amount of the benefit will be $114,235 during fiscal year 1991, and adjusted for inflation each October.

"OPEN BUTT" Forum
Have an opinion to express? An innovative idea to share? Submit them to the "OPEN BUTT" forum c/o Training for the next issue of the Salt Lake City Fire Department's news magazine.

other "qualified medical personal," and hospital employees who report potential violations.—by Paul Cotton

Medical News & Perspectives
JAMA, January 16, 1991—Vol 265, No. 3

New CPR Technique Improves Survival

(American Heart Association) A variation of the standard method of cardiopulmonary resuscitation (CPR) may improve survival following cardiac arrest. The technique, called interposed abdominal counterpulsation, consists of standard delivery of CPR supplemented by the synchronous application of additional pressure on the upper abdomen. The pressure on the abdomen pumps blood back toward the heart when the heart is between beats by forcing blood from the aorta into the coronary arteries, which furnish the heart with oxygenated blood in addition to the blood it receives with each chest compression. In a randomized study of this adjunct to conventional CPR, resuscitation was successful in 52 percent of the 62 patients in whom it was performed. In contrast, 26 percent of the 70 patients who underwent conventional CPR were resuscitated. The investigators note that further study is needed to determine whether this type of CPR can be performed by one person. Also, it is not known whether the abdominal compression would be effective if it were delivered less often than every heartbeat.—JEFFREY B. SACK, M.D., ET AL., St. Joseph's Hospital, Paterson, N.J.
Palmer DePaulis introduces Dennis Sargent, Salt Lake City's new Fire Chief who vows to serve the community and also plans to take care of the firefighters who provide the service. Deseret News January 10, 1990

Recruit Class #6 - Hired January 2, 1990  Photo courtesy of Lt. B. Simpson
Blaze Guts Home on East Bench; 2 Firemen Burned

Two Salt Lake City firefighters were burned Thursday battling a blaze that destroyed an East Bench home. When firefighters arrived, flames from the house had jumped to the roof of the neighboring home on the west but were quickly extinguished, said Salt Lake City Fire Battalion Chief Gordon Nicholl. The original fire was apparently caused by an exploding kerosene heater in the kitchen of the home. The two-story home was gutted within minutes, causing more than $250,000 damage, Chief Nicholl estimated.

Salt Lake Tribune 1/26/90

Costly Blaze Guts Cemetery Shed, Ruins Equipment

Fire gutted a storage shed at the Mount Olivet Cemetery on Thursday, causing more than $100,000 damage. The 2:30 p.m. fire destroyed the two-story building at 1348 E. 500 South, said Salt Lake City Battalion Chief Gordon Nicholl.

Much of the expensive equipment inside the building, including tractors, grave diggers and lawn mowers was also destroyed.

The blaze took more than 30 minutes to extinguish because firefighters had to take extra precautions against dangerous chemicals stored in the building.

Salt Lake Tribune 1/26/90

HISTORICAL HAPPENINGS - JANUARY 1981

Salt Lake Fire Department Probes $150,000 Warehouse Blaze

A fire that caused an estimated $150,000 in damage Monday at Industrial Container & Supply Co., 1444 S. Seventh West, was still being investigated late into the evening by Salt Lake City Fire Department investigators.

Deseret News 1/20/81

Blackout Keeps Police, Firemen Jumping Malfunctioning Furnaces

Salt Lake City Fire Department answered 51 calls by city residents who believed their homes were on fire when malfunctioning furnace motors caused homes to fill with smoke shortly after the power blackout.

A fire department spokesman said small surges in residual electrical power caused several furnace motors to turn at half-speed, causing furnaces to briefly heat up without circulating properly. The lack of proper circulation forced smoke through heating ducts.

Salt Lake Tribune 1/9/81
9 Deaths By Fire Recorded in 1966
By Joseph T. Liddell
Deseret News Staff Writer
January 10, 1967

Nine deaths - five from arson - Salt Lake City fires during 1966 topped all prior records for stationary structure blazes, fire department reports indicated Tuesday.

The total was nine times the 1965 toll - exclusive of a November, 1965, airplane crash fire (which claimed 43 persons) in the city.

The previous record was seven in 1956 and 1962. Five died in 1963 and one in 1964.

Salt Lake Fire Chief Grant R. Walker said the 1966 record was the city's worst for fatalities in burning buildings. Investigators are hopeful of a 1967 arrest of arsonists who ignited the Wendell Apartments, 204 W. 1st North, October 26, 1966. The fire killed five elderly persons.

"Dollarwise, last year was $400,000 higher in losses than 1965" (exclusive of the $3.2 million airliner crash fire) with a 1966 total of $1,178,671, Chief Walker said.

"We are still pleased that even though fires cost Salt Lakers more last year, the cost was about $200,000 lower than any of the three previous record years of 1959 with $1,382,009 in losses, in 1961 with $1,346,327 and 1963 with $1,338,744. However, the 1966 losses averaged $632.56 per fire, compared with $563.67 in 1965. Also, the per capita rate was $5.89 during 1966, nearly $2 per person more than the $3.86 per capita cost the previous year.

"The department experienced a 698-alarm jump in fire calls in the past year," Chief Walker reported.

"In 1965 the total alarms responded to was 2,468 and went to 3,166 in 1966. In actual fires, the difference was 594 more in 1966 for a total of 1,863 compared with 1,369 the year before."

Corning Fiberglass fire at 336 S. 3rd West, costing $45,000, and a Salt Lake Hardware Co. fire costing $37,387.

SALT LAKE ELEVATES 4 FIREMEN
Promotion of four command level officers in Salt Lake City Fire Department was approved Tuesday by the city commission.

Battalion Chief Leon R. DeKorver was promoted to assistant fire chief, with a salary increase from $775 to $816 per month, replacing Charles W. Bohn, who retired Jan. 4.

Captain Evan L. Baker was made battalion chief with a salary boost from $701 to $731. Lt. Darwin N. Sorensen was promoted to captain, $625 to $647, and First Grade Fireman Ernest Pierce was promoted to lieutenant, $539 to $578. Salt Lake Tribune 1-25-67

Seek New Station In Sugar House

Construction of a new and enlarged fire station for a growing Sugar House area was urged by S. A. Anderson, executive secretary, Sugar House Chamber of Commerce, before the Salt Lake City Commission Wednesday.

The commission directed Vernon F. Jorgensen city planning director, to confer with fire department officials and determine need.

"Fire protection in the Sugar House area, which has millions of dollars worth of new construction is grossly inadequate" said Mr. Anderson. "We need better protection."

Salt Lake Tribune 1-25-67
The Safety Officer

As mentioned previously, flames had burned through the roof prior to the initial dispatch, this information was relayed to me at home when I was notified.

On my arrival, heavy fire conditions existed on the roof with fire showing through the cockloft vents on the east and west sides. The second 15 minute notification was given shortly after my arrival at 00:22 hours, this was prior to my entering the building. The conditions I observed at that time were as follows:

A. Roof venting was late and not going well. This is not surprising knowing that venting the lightweight roof was not accomplishing ventilation of the cockloft.

B. Interior crews on the Third Floor were experiencing difficulties with smoke conditions and fire running the cockloft. Sector 3 was asking Command for ventilation they were told the fire had vented itself.

C. Ventilation Sector notified Command that the roof was very soft and spongy 30 feet in from the building front. This area was approximately over interior crews. Command was asking Vent Sector if they could trench or get something opened up, they said they would see what they could do. Vent Sector then asked for a saw to be brought to the roof. Multiple hoselines were also being taken to the roof by Engine 5. I had observed conditions and notified Command that I was going interior to observe conditions. When I entered the building the First and Second Floors were clear. On the Third Floor crews had extinguished the fire in the center stairwell and hallway. Ceiling was being pulled and streams directed into the cockloft. Fire control and smoke conditions were not favorable at this point in time. I had been interior for several minutes when Command stated that he had a report that fire may be on the Second Floor.

At this time I went to the Second Floor to observe conditions, this was approximately 00:32 hours, 40 minutes into the incident. When I opened the hall door on the 2nd Floor I was hit with hot, black smoke. I crawled down the hall approximately 50-60 feet. I could see heavy fire around the center stairwell and flames running the ceiling. I crawled back to the stairwell and tried to notify Command twice about conditions.

Having observed the amount of fire from the exterior, having been on the Third Floor and seeing conditions compared to the outside. Having seen and heard the difficulties with the venting, seeing the conditions on the Second Floor, as well as the time elapsed since dispatch, in addition to my inability to communicate with Command, I felt it was a safety issue and initiated the evacuation of interior crews. While crews were evacuating the building, fire was discovered on the First Floor, prior to the master streams operating and crews being evacuated.

I did not feel that additional attempts at interior attack were warranted. On the second attempt we were experiencing collapse of roof sections, this is not surprising due to the fact that the fifth (5), 15 minute (1 hour 15 minute post dispatch) notification was made prior to crews entering the building.

The final attempt was done at the ninth (9) notification, 2 hours 15 minutes post initial dispatch. This was not acceptable - What were we saving? I feel we were saving nothing and risking everything.

Lessons Learned and Reinforced

1. On a building of ordinary construction, if active/heavy fire cannot be controlled within 30 minutes of arrival, Command must evaluate the success and safety of interior crews. We definitely had heavy fire conditions in the voids overhead. We had experienced collapse of the roof.

2. We must recognize changes in construction, such as remodels and additions. This information must be relayed to Command so that informed decisions can be made.

3. Sector officers have a responsibility to relay progress or lack of progress reports to Command on a timely and continuous basis. Force yourself to communicate and keep Command informed. Do not assume that Command or the rest of the members are aware of what you know.

4. Ventilation must be done early in the operation. If there is an immediate rescue situation additional truck companies should be requested to satisfy priorities. Rapid venting with aggressive positioning of hoselines will go a long way in protecting life and property.
5. A self venting fire may not provide the ventilation needed. Fire that has burned through a roof (especially when multiple roofs and voids exist) will not provide adequate ventilation of cocklofts and voids. Remember "AS GOES VENTILATION, SO GOES THE FIRE" so "VENT EARLY, VENT OFTEN." Fire showing through the roof is not conclusive proof that the cockloft is vented. (See Fig. 3). Truck companies must rapidly open a ventilation hole, push down ceilings, force through obstructions and assess their efforts then inform Command.

6. We must back up our initial hose line, protecting stairways and hallways for evacuation and retreat. If additional working lines are needed - stretch them, but leave your protection intact.

7. Do not rely on always laying a pre-connect. Enough hose must be stretched to cover the entire fire area. Many of our engine companies are now operating with a gated alley lay concept where 200 feet does not cut it. Remember, move the line forward while it is dry. Don't ask for water until you have the nozzle and dry folds flaked out where you need them, at the fire.

8. When master streams are placed in operation utilize solid stream nozzles. When applying water don't always operate from above the roof line. As ceilings burn through or collapse utilize window openings to attack the fire from underneath. Mobility with heavy streams equals success.

9. Nothing we do is easy, we must consistently train and drill in procedures. We have an obligation to ourselves and the Public and those we work with to keep ourselves trained, informed and educated as to what our job is, then apply it to the best of our abilities. We must review what took place, what role we played, what happened, but most of all, what we learned.

Well that's enough of that. What's the bottom line? In this fire no one was injured or killed, the building is structurally sound. Engineers have given the owner guidelines for seismic upgrades. The owner is taking bids at this time for a new roof and interior renovations. I am not saying that the building will be standing and renovated a year from now, those are economic issues. What I am saying is that we did our job under less than ideal circumstances and learned valuable lessons in the process. That's the way I see it!