



**CITY OF SCOTTSDALE
FIRE LOCAL BOARD OF THE
PUBLIC SAFETY PERSONNEL RETIREMENT SYSTEM (PSPRS)**

MINUTES

Thursday, February 16, 2023

North Corp Yard
9191 E. San Salvador Drive
Scottsdale, AZ 85258

PRESENT: Hugo Meraz, Chairperson/Mayoral Designee
Monica Boyd, Citizen Member/Merit Head
Ken Strobeck, Citizen Member
Steve Springborn, Elected Member
Todd Cavner, Elected Member

STAFF: Autumn Asmus, PSPRS Local Board Secretary
Darlene Granger, Sr. HR Benefits Analyst

GUESTS: William Whittington, Law firm of BPCWS
Steve Leitzell

Call to Order

Chair Meraz called the meeting to order at 9:31 a.m.

Roll Call

Members present as listed above.

Public Comment

There were no members of the public who wished to speak.

Possible Executive Session

1. Approval of Minutes
 - a. Regular Meeting: January 19, 2023

Board Member Strobeck noted a typographical error in the motion for item 3, that the vote should indicate that "one" member dissented.

BOARD MEMBER STROBECK MOVED TO APPROVE WITH CHANGES THE JANUARY 19, 2023 REGULAR SESSION MEETING MINUTES FROM THE JANUARY 19, 2023, PSPRS FIRE LOCAL BOARD MEETING AS AMENDED. BOARD MEMBER CAVNER SECONDED THE MOTION, WHICH CARRIED FIVE (5) TO ZERO (0). CHAIR MERAZ, BOARD MEMBERS STROBECK, BOYD, CAVNER, AND SPRINGBORN VOTED IN THE AFFIRMATIVE. THERE WERE NO DISSENTING VOTES.

2. Approval of the 2022 PSPRS Fire Local Board Annual Report

Board Members expressed an interest in receiving a list of dates for meetings in which board members were absent.

BOARD MEMBER SPRINGBORN MOVED TO APPROVE THE 2022 PSPRS FIRE LOCAL BOARD ANNUAL REPORT. BOARD MEMBER CAVNER SECONDED THE MOTION, WHICH CARRIED FIVE (5) TO ZERO (0). CHAIR MERAZ, BOARD MEMBERS STROBECK, BOYD, CAVNER, AND SPRINGBORN VOTED IN THE AFFIRMATIVE. THERE WERE NO DISSENTING VOTES.

3. Phone conversation with Dr. Parker to clarify some answers on his medical evaluation re: Leitzell matter

Ms. Asmus noted that based on the fact that additional documentation was received by the Board early this morning, she has made arrangements for Dr. Parker to be available at next month's meeting. She will send the additional documentation provided by the applicant to Dr. Parker for his review in preparation for the March meeting.

4. Discussion and vote on the Accidental disability Retirement Application of Fire Captain Steve Leitzell

Chair Meraz gave Mr. Leitzell an opportunity to make a statement. He commented as follows:

Steve Leitzell: "Yeah, I feel like I know you guys pretty well by now, unfortunately, having gone through this process for the last few months to a year. I'm going to thank you guys all again for allowing me to come in there and being able to have this conversation with you. I don't know what – obviously it's a very emotionally charged thing for me to be sitting here in front of you, with him questioning my integrity and my credibility and my reasoning behind all of it, I want to bring forward some of the information that I've been able to go over and look at.

"I don't know what all of you guys' reasons for being on this board is, if you have a personal vested interest, if it was like, hey, you need to get in here because it's going to look good on an application or to be able to promote, but I just hope that you take this sincere at this moment, because these discussions are what's going to not only drive me but as well as other people

that are in the department in situations like this, that may have some kind of effect on their retirement. I have been fortunate enough to have been able to apply for my pension, receive my pension, but I could only imagine if you have a 10-year or 15-year firefighter that's not able to acquire that pension and is hoping to get into a PTSD-type situation where they can be medically retired because they are having problems or issues due to some calls or some tragic events that had happened on shift.

"I have researched a little bit through Mayo. I've got Mayo, I have a number of other credible resources. Mayo to start with, and you can find this online, and it's very simple. And it talks about most people who go through traumatic events may have temporary difficulty adjusting and coping, but with time and good self-care, they usually get better. If the symptoms get worse, last for months or even years and interfere with your day-to-day functioning, you may have PTSD. Post-traumatic stress disorder symptoms may start within one month of a traumatic event; sometimes symptoms may not appear until years after the event. This causes significant problems in social or work situations and in relationships. It also lists some of the symptoms: intrusive memories, recurrent unwanted distressing memories of the traumatic event, which is something that I had, flashbacks, we can talk about avoidance, trying to avoid thinking about it or talking about it, avoiding places, the negative changes in thinking and mood. Symptoms of negative changes in thinking and mood may include negative thoughts about yourself or other people in the world, hopelessness about the future, feeling detached from family and friends, lack of interest in activities you once enjoyed, feeling emotionally numb, changes in physical and emotional reactions, emotional reactions meaning always being on guard or for danger, self-destructive behavior such as drinking too much, driving too fast, trouble sleeping, trouble concentrating, irritability, angry outbursts or aggressive behavior, overwhelming guilt or shame. PTSD symptoms could vary in intensity over time. You may have more PTSD symptoms when you're stressed in general or when you come across reminders of what you went through.

"So with that being said, whenever I went into Dr. Parker's interview, I sat down and I had a scripted amount of notes. The first time that I went in to [Dr. Korkorski](#), I was very vague, I wasn't able to generate anything. I wasn't sure what I was able to discuss with him and I honestly went in there very unprepared, because my mind was in a totally different mindset at that point. Since that time, I've had some clarity, I've had some time to deal with my situation, and I put together my notes with the intent of, obviously, going into that it's very confusing, you're being asked questions. I wanted to try and stay on track.

"So with the notes, I went in there and basically just laid out everything from my birth to the point that I'm at now. But with that, I laid out the timeline of events and how my professional career has changed over the years from 1998 whenever I was a reserve firefighter, all the way to the time that I got promoted captain, to the time that my final day was on the truck. And I addressed in those notes, and I left these with Dr. Parker, addressing Thanksgiving of 2019, something that I want to cite. This is whenever I had that first instance of a PTSD moment where I was like, oh, something's going on. I didn't start counseling -- so that happened in November of 2019. I didn't even start counseling until February of 2020. There was no issues with me at work. There were no disciplinary actions at that time. It took me over three months to finally come to the course of, like, I needed help. And it was only because of my family and because of my crew members that came towards me and said hey, there's something wrong.

"In March of 2020, we went to -- that following -- so what, from February we were in counseling, until March of 2020, we had Covid. Covid started, everything went online. So from that point on, everything went to online and I didn't feel like I would get the appropriate resources to be able to do it. I just know that in person is still different than arguing with your wife, do you really want to do it over the phone or over an internet connection or do you want to have the conversation with them in person?"

"The following May of 2020 is whenever I had the rollover incident with the teenage girl. That day, I immediately told my supervisor that I wanted to go home. I became very hypervigilant with my family. I remember being agitated, unable to sleep. It got worse and worse. I was daring to even take OTC, over the counter, sleep meds like Benadryl and melatonin while on shift trying to get sleep, because I was at that point where I was just up for 24 hours, regardless.

" I was afraid to run the high-stress calls. And this is all the things that I told the doctor, but it wasn't really something that he acknowledged in any of this report or this evaluation. He may have skimmed over it, and may have made a note, but he never really got into in depth as to why this being a problem or issue, which is concerning to me.

"Then in June 2020, I attempted a virtual counseling and it was on the premise of this incident happened and I knew that there were things that were bothering me. And I did this virtual counseling, and the doctor refers back to that as to me reporting to the counselor as being everything is fine, everything is good. Why would I make that time to make that time with a counselor if everything was so good? It was all virtual. I didn't feel like it was a good time for me to discuss it. I didn't want to do it over -- over the internet. I wanted to be in person and ultimately, I just ended up just driving away from it. I was like, this is not going to work out. I didn't want to bring up a new situation. And this issue continued to obviously cause issues in my life, mentally, emotionally, spiritually.

"And then in October of 2020, I got injured while I was at work. So May was whenever the incident happened. October was whenever I got injured at work. From that point on, I went to light duty. I was no longer on the truck. I wasn't having to live those high-stress incidents. I was put onto desk duty.

"So in the report that the doctor has, he states that I was able to work for the following year. Well, in fact, from October until the time that I retired the following May, I wasn't at full capacity. I was off the truck. I was on light duty. I wasn't having to run these high-stress calls, so it was easier for me to deal with just day-to-day work from there."

Board Member Springborn interjected to explain what light duty entails.

Steve Leitzell: "So then the following spring of 2021, there was a training captain opportunity. I applied for that with the intent of no longer having to be on the truck, in hopes of being put onto a 40-hour work week and being able to sleep at home, being able to use actual medications to be able to sleep, and not being placed into those high-stress incidents. That was my whole entire desire to want to be on that and be able to work in that capacity.

"In May of 2021, I had the personal incident and then I ended up retiring shortly after it. I produced a resignation letter to the doctor that said due to family and personal health. I gave

that to the doctor. That's why I retired. In May of 2021, I knew that with all the stress that had happened from our personal incident from what I was already dealing with from this rollover from this girl, that I needed counseling, that it would be a significant issue if I didn't get counseling.

"In December of 2021 -- so I already had my pension -- that's whenever -- I started talking to some people about that time and they said, look, I think you need to look into possibly getting a disability and getting into the retirement system. They realized, not me, that there were some significant similarities between what happened with that girl and what happened with my daughter from the May incident. And they recognized that before I ever did.

"So I met with your IME, [Dr. Korkorski](#), in March. I was very vague with him. I would say that that evaluation was not a true evaluation. And it wasn't his fault. That relied on me, because of my situation and I wasn't able to present him with all the facts and situations that had happened.

"In April, I ended up starting a new job. We literally drove right by that location where this girl had died. And just from driving by that, I had a physical, emotional reaction to it. And my wife identified it over the course of the next two weeks and she was like, you need to go back to counseling. She was like something's wrong. I went back to counseling, sat down with my counselor and we went through the process and everything. And I produced an email to him to show him that there was actually a time that I said to her and what was exactly said saying hey, I'm having some real difficulty. It was 10:30 at night. It was after having an argument with my wife, and I'm being very vulnerable here. And I handed that to him to look at so he could see that -- I didn't know what the outcome was from [Dr. Korkorski](#) yet. This wasn't done with the intent of oh, hey, I got denied and now I have to have some kind of produc -- produce something saying that there was a problem. You know what I'm saying? I hope you can understand that.

"I had a follow-up appointment with her on May 4th. May 23rd was whenever I found out about that [Dr. Korkorski](#) had denied me due to the reasoning, and obviously good reasoning at that time, because I wasn't able to give solid information to him.

"In my counseling sessions, July 5, 2022 is whenever I actually -- and this is documented by my counselor, that I was emotionally connected with the two events. That's whenever I finally saw that what happened to this girl and what happened with my daughter and how that manifested my PTSD to come out on that July -- or I'm sorry, May of 2020 -- May of 2021. I apologize. That's whenever I finally realized what was going on and I started to come to some terms.

"I had legal issues from that point on afterwards. It was shortly after actually sitting in this room and talking to you guys and you guys approving for me to go into an IME situation. And then once I was out of the legal situation, I went and saw a primary care physician. And my primary care physician prescribed me Zoloft, she identified me with PTSD.

"I also saw a forensic psychiatrist while I was going through my legal proceedings just before Korkorski and also in October of this last year. Her first findings were exactly what [Dr. Korkorski](#) had found, because I was very subdued, I wasn't able to be open with her. Then you come back to the October time, whenever I actually was able to be open with her and I realized how much I could really relay and talk to her about and her -- her diagnosis had changed from no PTSD to having PTSD. And that was also all submitted to [Dr. Korkorski](#). And she does a very

good job of outlining the whole entire situation of what had happened from start to finish and she was very detailed in her questioning and storyline.

"This is all coming from my notes. And so in those notes, I also say that I was very resistant to taking any kind of mental issue -- medications for mental issues. Having been on the other side as a firefighter, we always thought negatively and critically of patients. I relayed that to the doctor. After discussing my story with my peers, they had stated that if I had not been arrested in the first-off duty incident, there was a high probability that I would have attempted suicide and ended my life.

"I realize now looking back on my demeanor, my attitude, and my lifestyle began to slowly change in a subtle manner. I was living recklessly, turning to alcohol, and participating in risky activities and behavior that was uncommon to me. Come to work after staying up late drinking, no desire to participate with my crew or utilize the gym. This is after the May 2020 incident with the girl. Off duty I was speeding, I was driving recklessly, I was drinking and driving, I was staying up late and going to work the next day. And I cite, it was like a cancer that was spreading, but I didn't even realize that it was there. I see how so many of those calls had affected me. They were like little papercuts, one after another, but this one was the one that stung and this is the one that actually was the nail in the coffin for me.

"To **Dr. Korkorski**, I tried to relay to him that I had multiple stressful incidents throughout my life prior to that, personal incidents. And we're talking about going through paramedic school while my wife was on bedrest and I was able to handle that. My mom's -- my wife's death -- my wife's mom's death and how she struggled with a lot of emotional and spiritual issues at that time. with her dad's death. We went through financial obligations, multiple issues with now running a new business, owning a commercial property and having to run that and learn how to manage that, and still working overtime and trying to make ends meet financially through overtime and everything else and working the same job that I had. And I've never had in the course of my lifetime any kind of legal issues, I've never had any financial issues. I was always put together and very -- very strategic in everything that I did. But after that May 2020 incident, everything changed and that's what I was trying to drive ahead to Dr. Parker, so he could see that there had been some kind of change. This window of time, something changed in my life and in me and there is nothing else that you could point to, having dealt with everything else in my past, now all of a sudden this is what really broke me.

"After running on a call without even being aware, my world changed in the two-and-a-half year window and ensuing the call, my life began to crash around me. I was spiraling down and didn't even realize it. It took me leaving the department and subsequent events so that I was conscious of what I was dealing with. I see a fire truck or a ladder, I resent and despise the idea of ever having to return to the job. I look back at that call and wish that I had never ran on that girl. I find myself not wanting to watch the news. The exposure to the negativity and thinking about the calls they report on, it makes me think about calls that I had been on and how they played out and it makes me think about calls that I had detested and just don't ever want to have to see again. My wife even to this day complains about how I have short-term memory issues. And I go on to talk about how PTSD is very much like a cancer.

"I hope I'm not boring you guys with any of this. I mean, there's a lot more to discuss about it if you guys are okay with it and I'm open to any kind of questions. I also --"

Board Member Springborn interrupted to ask about Mr. Leitzell's reference to not being able to provide information to the doctor during his first IME.

Steve Leitzell: "It was a recommendation from my attorney and he was kind of vague about it. And at that time, obviously we were very much in the thick of it. I wasn't thinking clearly. I wasn't able to really discern, you know, what -- what was already out there, what was the information that they knew about versus -- and so whenever -- whenever the IME asked me questions, I was like I can't talk about anything that happened on my situation. Now it's all behind me and I'm able to move forward with all of it, so I was able to be a lot more open with Dr. Parker. But he really -- I feel like he was driven to just ask questions that he had on his plate to answer the questions that he was required to answer, but he never delved into it. And to be able to make a good assessment, I feel like he cut me off a lot of times and did not go through the entire story that I'm telling you even now. And in it, he might cite it, but he never really acknowledges how that was played out and how that would not affect my situation.

"I brought it to him -- and I apologize. I also brought to him a letter that one of my former crew members had given me, or submitted to my wife whenever I was going through my legal issues. And this was to the judge. And he states 'Throughout all those calls, I am aware of only one that I had noticed a difference in Steve. I believe it was the May 14, 2020. It's hard to describe exactly what the difference was, but if I remember right, Steve went home on that shift after that call. It's hard not to associate your own family in moments like that, especially when the patient is of similar age. He seemed to recover, but as many of us know, we all seem to be okay until we're no longer okay. Steve's recent behavior is, in my opinion, way, way, way out of character.'

"I have the national institute of mental health, also another resource that you can easily just look up PTSD and it talks about the exact same thing that Mayo had about reliving an event, normal to have upsetting memories, feel on edge, or have trouble sleeping after a traumatic event, hard to do daily activities, work, go to school. PTSD symptoms may start later or they may come and go over time. If it's been longer than a few months and thoughts and feelings from the trauma are upsetting you, you may have PTSD.

"So Dr. Parker references multiple times about -- or he references about me going through my notes. I believe that it was -- I was told by the Board as well from my lawyer to make sure that I bring in notes and be able to use them. It was almost like that was a negative check on me for using my notes, like it was rehearsed. The notes were truly to be able to be honest and to not be vague and to be straightforward about what was going on. In his notes he said I was avoiding returning to the truck. I think that's a poor example for him to use that word. If it's something that I said, it was obviously taken out of context and I didn't mean to say it that way. I was afraid to go back onto the truck and to be able to run those calls and be there for 24 hours and not sleep and make good decisions with my crew and for the patients and for the customers that are out there.

"On page 4, I did report that his peers had said that I should consider seeking medical retirement. They had seen the relationship of how similar the on-duty incident was to my off duty situation. On page 7 he talks about additional history. I was trying to impress upon him at that point, whenever I was talking about all the stressors that I had in my life, I was trying to impress upon him how much I had endured in the past and never had any acute or chronic

issues, no legal issues, no breakdowns mentally or anything. On page 7 and 8, initially evaluated my psychological condition from my criminal case. He said that I was defensive and vague just as I was -- or I'm sorry, I said that I was defensive and vague just as I was with **Dr. Korkorski**. Whenever I sat down with Dr. Celia Drake the first time and this is what I'm addressing at that time.

"Again, he also on page 12 he states that I was able to remain employed for almost one year without incident. Again, we were on -- I was on light duty, which is not a full duty situation where you're having to deal with those high stress jobs, the calls and being there for 24 hours at a time."

Board Members explained to Mr. Leitzell that the Board would not be making a determination in his case today, because the Board Members had not had an opportunity to review the newly submitted information and had not had a chance to communicate with Dr. Parker.

Steve Leitzell: "I mean, if you want me to end I can end it. But, I mean, what it basically comes down to is that I don't feel that --"

Chair Meraz assured Mr. Leitzell that they were not trying to rush him. The Board just wanted to make sure he understood that they needed proper time to review all of the documents.

Steve Leitzell: "I apologize for giving it to you last minute. I mean, I would have -- I would have loved to have come in here the last time and be able to bring it, but also I, unfortunately, didn't get that information and be able to review that and understand that we were going to be having a board meeting within the time constraints that I was under at that time. So unfortunately, I was only able to get it out there this morning with everything else going on. And to be honest with you, it's something that I don't want to keep reliving and going through and having to send out.

"So I had to speak to a couple of people and discuss whether or not this is something that they felt would be appropriate for me to send out to you guys and be able to move forward. And my intent, like I said, me, I was able to get a pension and I'm very fortunate for that. But my intent is to actually come forward to you guys and say that there are flaws with what Dr. Parker has presented, whether it's omitting certain information or not even acknowledging it through all of this. And the one thing that he really stood on is citing back to **Dr. Korkorski**, and **Dr. Korkorski** got a poor evaluation of me, because I was not able to be up front with him. So whenever he cites back to **Dr. Korkorski** and that there would be differences in the way that I presented from **Dr. Korkorski** till now. **Dr. Korkorski**, I was very defensive.

"At this point, I was very vulnerable and open with all of my answers and including the written tests, he cites back to the written tests. And on those written tests, he took those written tests, he put me in a room by myself, handed them over to me and I finished out those written tests by myself. He was not present at any time to be able to come back or available if I had questions about them. But on those written tests, he makes it very clear that there were certain questions that I had -- in fact, if you don't mind, this is the one thing that I do want to actually talk about. Shows evidence of substantial exaggeration on two of the instruments, which is the MMPI-3 and the TSI-2. On the MMPI, it says 'This evidence is ambiguous, as some individuals with credible genuine reporting of severe psychopathology report in this way.' That right there kind of

negates a lot of the stuff that he may be finding in this. And then on the TSI-2, the validity summary, it says 'there remains a possibility that he is credibly reporting genuine symptoms.'

"Dr. Korkorski was not available whenever I did take these tests. He was actually with a client from what I understand, so whenever I did walk out and I did have a question, his door was closed. So these tests really don't reflect, because I was not able to actually address what the problems were, what I saw in some of these questions, which are some of these ones, which way to answer them? Am I answering about the present time or am I talking about my past? Because I've had almost two years to be able to deal with my issues, but there are some of those questions that are in these tests that were prevalent and significant at the time whenever I was going through this stuff.

"And I can sit here and cite and go through all of the questions, but he says that I would be capable of still continuing to do my duty. But I would have to ask any one of you guys, knowing now what I was going through at that time, whether or not you would want me to run on your family member or on you at that time. Having those mental health issues in the back of my mind and dealing with all that and what the result was, I think that's pretty significant, because I would say no."

BOARD MEMBER SPRINGBORN MOVED TO GO INTO EXECUTIVE SESSION. BOARD MEMBER CAVNER SECONDED THE MOTION, WHICH CARRIED FIVE (5) TO ZERO (0). CHAIR MERAZ, BOARD MEMBERS STROBECK, BOYD, CAVNER, AND SPRINGBORN VOTED IN THE AFFIRMATIVE. THERE WERE NO DISSENTING VOTES.

EXECUTIVE SESSION HELD FROM 10:03 A.M. TO 10:18 A.M.

BOARD MEMBER STROBECK MOVED TO TABLE THE DISCUSSION ON THE ACCIDENTAL DISABILITY RETIREMENT APPLICATION OF FIRE CAPTAIN STEVE LEITZELL FOR THE PURPOSE OF ALLOWING TIME FOR DR. PARKER TO REVIEW THE ADDITIONAL DOCUMENTATION PROVIDED BY THE APPLICANT (REFERRED TO IN DETAIL BY LEGAL COUNSEL IN EXECUTIVE SESSION) AND ANSWER IN WRITING THE QUESTION OF WHETHER HE FEELS THE ADDITIONAL INFORMATION WOULD CHANGE HIS PREVIOUS IME AND, IF SO, WHAT THOSE CHANGES WOULD BE. BOARD MEMBER CAVNER SECONDED THE MOTION, WHICH CARRIED FIVE (5) TO ZERO (0). CHAIR MERAZ, BOARD MEMBERS STROBECK, BOYD, CAVNER, AND SPRINGBORN VOTED IN THE AFFIRMATIVE. THERE WERE NO DISSENTING VOTES.

BOARD MEMBER STROBECK MOVED TO SEND MATERIALS RECENTLY PROVIDED BY STEVE LEITZELL TO THE IME DOCTOR FOR REVIEW. BOARD MEMBER CAVNER SECONDED THE MOTION, WHICH CARRIED FIVE (5) TO ZERO (0). CHAIR MERAZ, BOARD MEMBERS STROBECK, BOYD, CAVNER, AND SPRINGBORN VOTED IN THE AFFIRMATIVE. THERE WERE NO DISSENTING VOTES.

5. Induction of new City of Scottsdale Firefighters into PSPRS, if any

Board Member Springborn noted that three of the applicants' medical records included health questions regarding their LGBTQ status and one listing HIV as a preexisting condition, both of which are irrelevant and should not be included in their permanent records. He asked that the

information be removed from their files and that staff ensure that type of information is not included as part of anyone's medical records in the future.

BOARD MEMBER SPRINGBORN MOVED TO APPROVE THE INDUCTION OF NEW SCOTTSDALE FIREFIGHTERS, STEFAN DUDZINSKI, DANIEL GASTELLUM, JOHN GERACI, TYSON KAAS, DARRICK LAWSON, BRIAN MISSIRLIAN, JACK RENNER, AND STEVEN ROEMBKE WITH AN EFFECTIVE DATE OF JANUARY 30, 2023. EACH WILL BE INDUCTED WITH PRE-EXISTING MEDICAL CONDITIONS, IF ANY, AS NOTED ON THE LISTING THAT IS INCLUDED WITH THE BOARD PACKET.

6. Report to the Board on recently completed service transfers, if any

There were no recently completed service transfers.

7. Board suggestions for upcoming agenda items

Future agenda items could include:

- PTSD training

Adjournment

BOARD MEMBER SPRINGBORN MOVED TO ADJOURN THE MEETING. BOARD MEMBER CAVNER SECONDED THE MOTION, WHICH CARRIED FIVE (5) TO ZERO (0). CHAIR MERAZ, BOARD MEMBERS STROBECK, BOYD, CAVNER, AND SPRINGBORN VOTED IN THE AFFIRMATIVE. THERE WERE NO DISSENTING VOTES.

With no further business to discuss, being duly moved and seconded, the meeting adjourned at 10:28 a.m.

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