TERMINAL CONDITIONS







The Five Diseases That Will Kill Your EMS Agency











Presented by

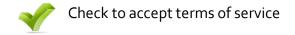
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DISCLAIMER

The opinions expressed in this presentation are strictly those of the presenter and not any agency he works for, has worked for, or may have been associated with in the last century. Furthermore, the presenter harbors bias toward none and a healthy skepticism about all, therefore, the lame, stupid and counterproductive habits of the great and small shall be skewered equally, regardless of source. The audience is encouraged to cheer, stomp, shout, but refrain from throwing solid objects or damaging any property of the hotel. In addition, all audience members should plan on being offended by at least one comment or idea presented herein. All differences of opinion shall be resolved by a post-conference adult beverage amongst people whose heart and soul bleeds EMS, and who strive to keep their organizations alive and healthy, sometimes in spite of themselves.

-Gene lannuzzi October 2013



AREYOU IN A SICK ORGANIZATION?

- EMS people use the "eyeball test" to determine if a patient is "sick" or "not sick" all the time.
- If they "look sick", they probably are, and you know that before you ever touch them
- Can you also tell if an organization is "sick" just by looking?

ABSOLUTELY!

Is the Culture Ethical?



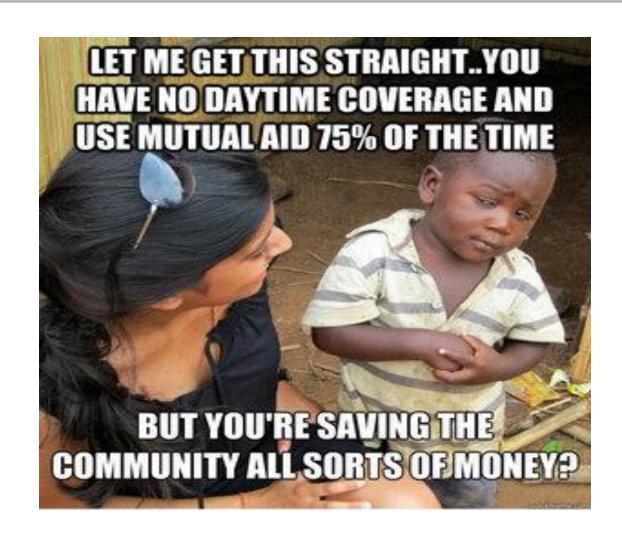
DIFFERENCE BETWEEN WHAT YOU HAVE A RIGHT TO DO AND WHAT IS RIGHT TO DO.





~ POTTER STEWART ~

No Bulls**ting the Public



No "Helping Yourself"

City fire chief suspends Baltimore EMS training after cheating revealed Cheating allegations by applicants investigated

NEW YORK (CBSNewYork/AP) — Three emergency medical technicians stole more than \$325,000 from a Queens volunteer ambulance corps, New York Attorney General Eric Schneiderman said.

EagleTribune.com, North Andover, MA June 20, 2010

Editorial: Cheating EMTs violated the public's trust

N.Y. ambulance company owner pleads guilty to Medicaid fraud scheme

WEDNESDAY, OCTOBER 23, 2002

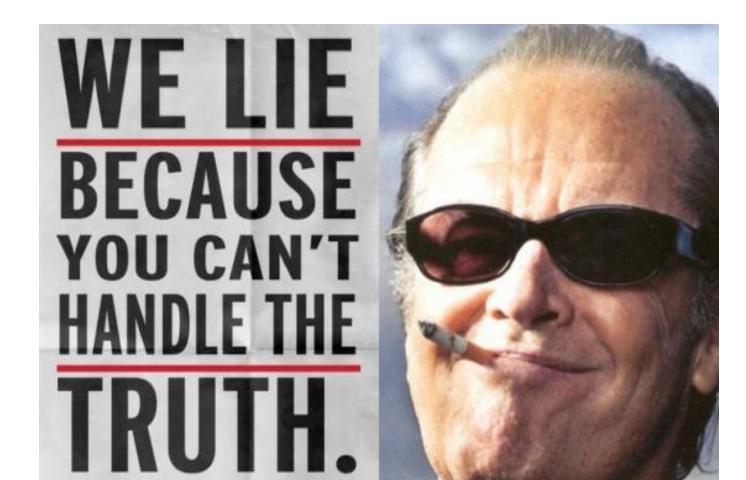
DOI ARRESTS EMS LIEUTENANT FOR THEFT

- Stole Five Thousand Dollars In Unearned Overtime Payments -

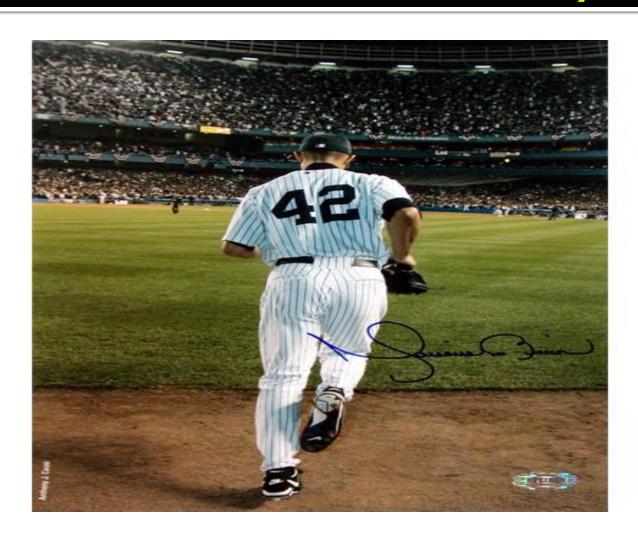
Posted: Oct 03, 2013 11:49 AM EDTUpdated: Oct 03, 2013 11:49 AM EDT-NEW YORK (MYFOXNY) -An upstate paramedic is facing felony charges after being arrested for stealing from victims he was called to help.

Tom Got to the Bottom of This (so can you)

"You want answers?"



Simple Lesson In Ethics (You Want to be THIS Guy)



That's Only the Beginning

- Most reasonable people agree on "the big stuff"
- It's the "little stuff" that goes on day to day that slowly kills an organization
- Usually, it goes on right in front of you
- Could you identify the symptoms and signs of these

TERMINAL CONDITIONS?

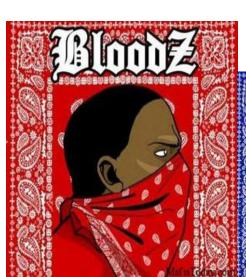


TERMINAL CONDITIONS

#1. THE GANG MENTALITY



Everybody Knows These Guys













But What About THESE Guys?

- Volunteers vs. Paid
- Fire Dept. vs. Private
- Union vs. Non-union
- Urban vs. Suburban/Rural
- EMTs vs. Paramedics

EMS Displays of Gang Mentality

GANGS

- Protect turf
- Use colors and signs to identify group
- Insular, attack rivals at will
- Will use intimidation and violence to achieve goals
- Survival of the group matters more than anything

EMS GANGS

- Protect Turf
- Use patches and titles to identify group
- Insular, attack rivals at will
- Will use intimidation and manipulation to achieve goals
- Survival of the group matters more than anything

Ever try to have a rational discussion about....

- EMS Education?
- EMT-CC vs. EMT-P?
- The "morality" of volunteers vs. paid?
- Why should medics be in fly cars?
- "Combination"
 Depts. and regional plans?









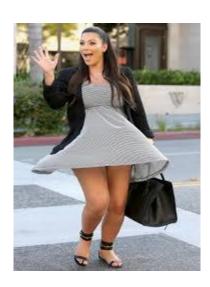
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#2 NO SENSE OF HISTORY



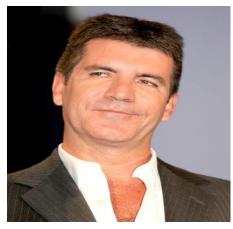
If you know these people...











But don't know THESE people..



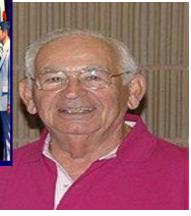












You should at least know THESE people

















Questions That Need Answers

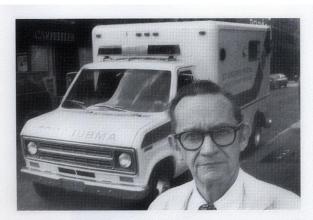
- How was your system/agency founded?
- Who were the major players?
- Why is your system designed the way it is?
- Why hasn't it changed?
- Is that good or bad?
- The roots of current problems are often found in the past
- If you don't know what came before, you CAN'T be part of the solution

History Matters

- Fire services have long recognized the value of traditions and history (yes, it can be a two edged sword)
- EMS history, both collective and local, is rarely kept, honored less, and known by very few
- We are at a point at which the founders of modern EMS nationally and locally are gone
- We are also at the point where a generation of new EMS providers were under the age of 10 on 9/11/01
- Because EMS is so fragmented, few organizations have the dollars, time, and space to preserve EMS history on a national level; almost no one on a local level does, and if they do, only for their small corner of the world

Don't Know History? Some People Like it That Way

 St Vincent's Hospital Cardiac Ambulance, one of the first attempts at modern ALS in NYC 1970's



Dr. William J. Grace, the father of modern cardiac care. He recognized the urgency (code 99), defined the continuing risk (arrhythmia) and reconfigured the delivery system by bringing heart care to the patient. Portrayed in 1970 in front of SV Mobile Coronary Care Unit ambulance.

 But some of these guys would like you to believe EMS in NYC started in 1996



Who's Keeping YOUR EMS History Alive? (and are you honoring those who came before you?)



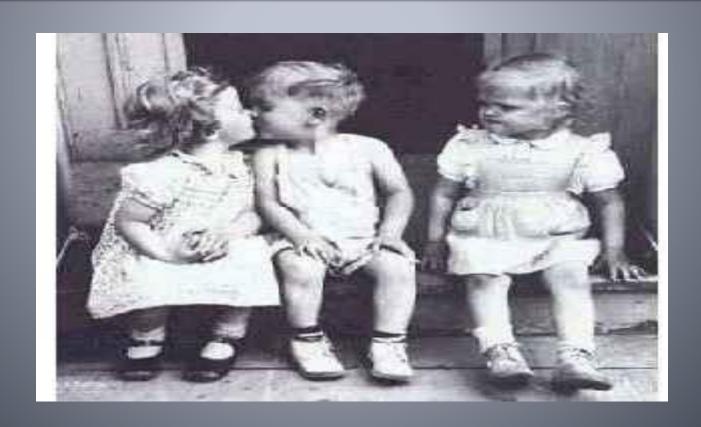






TERMINAL CONDITIONS

#3 PROFESSIONAL RESENTMENT



Wanna P*ss People Off?

(in a sick culture?)

- Get promoted
- Get an advanced certification
- Attend a conference
- Become an Instructor
- Write an article
- Express an opinion publicly
- Offer a suggestion
- Challenge the status quo

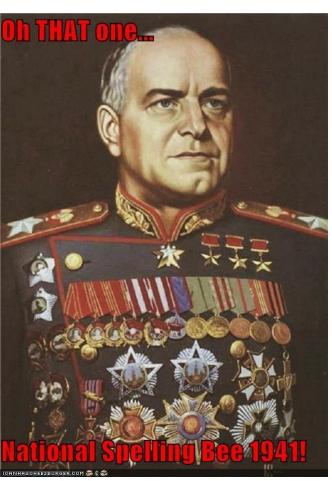
Of Course, There's Another Way Too

- Do all the previous things, and then get a swelled head
- Forget where you came from
- Treat anyone with a clue suspiciously
- Use the phrase "who the f**k do they think
 - THEY are?" frequently
- Lose sight of what's important

Is THIS What's Important in YOUR Organization?









Do You Hear What I Hear?

(and what it really means)

- He's just a freakin' dinosaur
 (His experience is threatening)
- She doesn't know crap, all she ever did was volunteer in cupcake county (She might know just as much as we do)
- We do it for love, you do it for money
 (I wish I could get a job doing what I love and I'd take
 the dough in a heartbeat)
- They think they're hot s**t because (fill in blank)
 (We better sign up for the next (fill in the blank))

Is this How Your Squad Rewards Success? (or obtains it?)





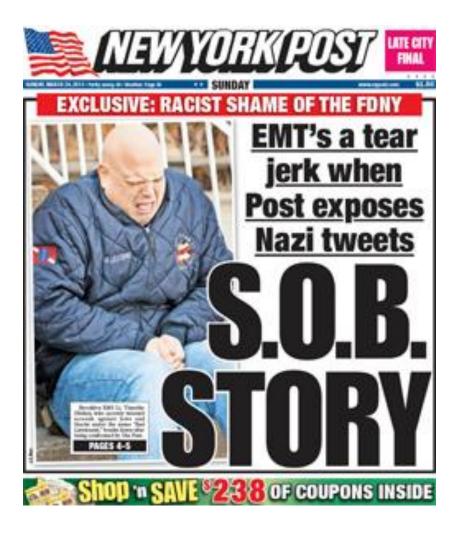
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#4 BLATANT HYPOCRISY ABOUT PATIENT CARE



Think This Is an Isolated Incident?

(or that it only happens in someone else's agency?)



- It isn't, and it doesn't
- Things previously spoken of only in private, as "stress relief" now go public
- Sometimes, its even said to patient's faces
- Social media has enabled the jerks among us

Remember THIS one?

(Yes, they walk among us)





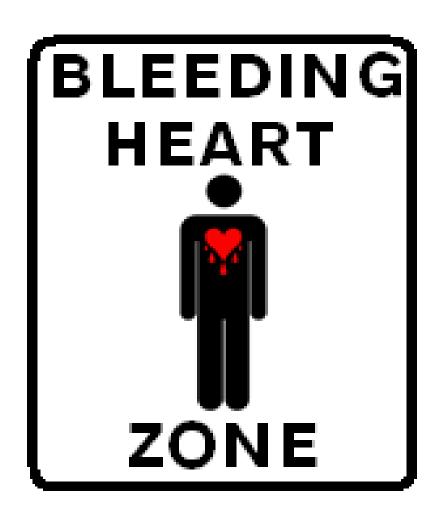


It's far from just the high profile cases (and you've probably heard all of these)

- Squad refuses to accept calls from local nursing home, citing strain on services
- Volunteers turn out en masse for arrests, fires, MVC's, and MCI's, but go to mutual aid for elderly sick, minor injuries, other low priority calls
- Anything not a call type deemed "worthy" of response is derided as "system abuse"
- Expired meds, broken equipment, dirty vehicles
- Blatant disrespect for culturally different patients (and crew members)

No, I'm Not

(although I DID grow up in the 6o's)





But Let's Be Honest

- Is the culture in your organization enabling people who behave as if patients don't matter?
- Are only "certain" patients treated with respect and dignity?
- Does your culture confuse arrogance with "street smarts"?
- Does "public service" mean you serve the public, or are they expected to serve you?

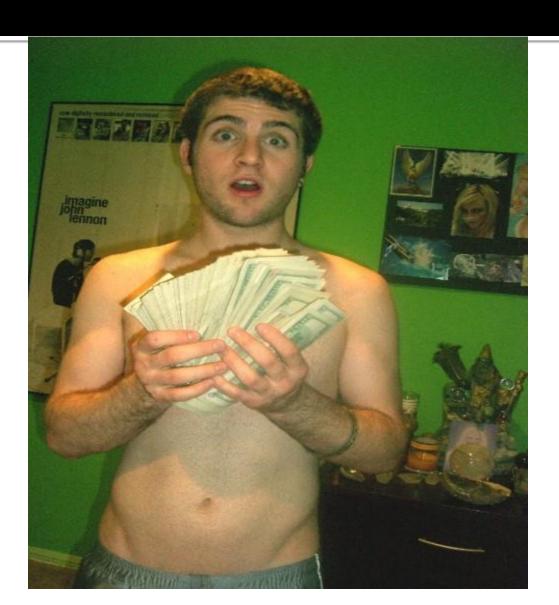


TERMINAL CONDITIONS

#5 WORSHIPPING AT THE ALTAR OF PURCHASING



Is THIS guy Running Your Finances?



Does That Purchase Have a Mission?

"Beach Response Unit" bought at EMS Conference



(No Beach in District...but they might need it for mutual aid!)

WOW! That's BIG!!! But.....



What's actually in those cabinets?

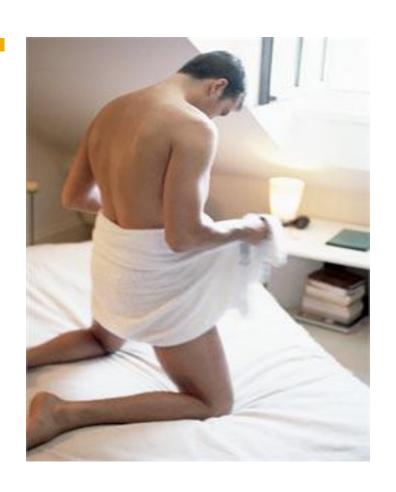
Why is There Money to Purchase...

- Rescue tools (for non rescue agencies)
- Ambulances the size of a condo (to replace one with less than 50k miles)
- Bars (but no one EVER drinks on duty!)
- Gyms (when crews don't stay in quarters)
- Command cars (for half a dozen chiefs, assistant chiefs, deputy chiefs, past chiefs...)

But No Money For...

- Hemostatic Dressings (Too expensive...true story!!)
- Conferences and educational presentations
- Maintaining a pharmacy for ALS units (too much paperwork...oops...NYSDOH just fixed that)
- Personal protective gear
- Reliable radios and communications

Could other motives be at play here?



He's just checking.....
(while the checking account gets depleted), but it's your community that's getting screwed.

Is There A Cure for Organizational TERMINAL CONDITIONS?



In a Word, YES

- "Most discussions of decision making assume that only senior executives make decisions or that only senior executives' decisions matter. This is a dangerous mistake"
- "Rank does not confer privilege or give power. It imposes responsibility"
- "Never mind your happiness, do your duty"

-Peter Drucker

Developing a Culture Of Excellence

The Disney Company's 10 Management Principles:

- 1) Make Everyone's Dreams Come True
- 2) You Better Believe It
- 3) Never a Customer, Always a Guest
- 4) All for One and One for All
- 5) Share the Spotlight
- 6) Dare to Dare
- 7) Practice, Practice
- 8) Make Your Elephant Fly
- 9) Capture the Magic with Storyboards
- 10) Give Details Top Billing

Developing a Culture of Excellence

Good references for good organizations:

- Speaking Truth to Power Aaron Wildavsky
- In Search of Excellence Tom Peters
- If Disney Ran Your Hospital Fred Lee
- Reframing Organizations Bolman and Deal

OMG...he expects our bosses to READ!! (no, I suggest YOU do, to educate yourself, to save your organzation!)

Steps YOU Can Take NOW

(whether your organization changes or not)

- Personal integrity
- Form alliances with like minded people
- Encourage new ideas
- Maintain boundaries-what behavior you'll allow is what you'll get
- Treat others as you wish to be treated
- Find healthy ways to vent
- Accept leadership (whether it comes with a title or not)
- Speak truth to power and let the chips fall where they may
- Never forget what's really important in EMS

MAKING PEOPLE FEEL SAFE AND CARED FOR

And Remember, No Matter What...



