NTERFACE

My Sector, Right or Wrong

by Jack L. Stout

It was me all right—beard, paunch, aggressively receding hairline, etc. I remember the setting, too, and the conversation I had with Dominick Barbera, president of Dade County, Florida Local 1403 of the International Association of Firefighters, as picketing IAFF members looked on. But though I recognized the photo in the May-June issue of International Fire Fighter, the caption described an event with which I was totally unfamiliar. unfamiliar.

The caption writer apparently takes my company (The Fourth Party) more seriously than I do—he called it The Fourth Power. Then truth really bit the dust, because according to the caption Mr. Barbera had ''confronted'' me. He hadn't—in fact, no one had ''confronted'' anyone. Upon learning about the pickets, I had left my workshop on ''Contracting Paramedic Services,'' gone out to the picket line, and asked if I could speak to someone in charge. That's how I met Mr. Barbera.

Although one might argue about the meaning of "confront," the caption's next sentence was simply a lie. I quote: "[The] firm was teaching city managers in the state techniques to use in breaking unions and eventually turning fire service duties over to a private firm to run fire department and ambulance services." The untruth of that sentence may be summarized as follows:

There were no city managers in our workshop; nearly all the participants were from out of state; we

neither teach nor advocate the "breaking of unions"; and we have never advocated privatization of fire suppression or fire prevention services.

Some of our workshop participants are fire department officials interested in learning how their own departments can develop competitive offers to serve their own or neighboring jurisdictions. We don't advocate "contracting to private firms." We do advocate awarding EMS responsibility to that organization which is best-qualified to handle the job in a given community. We don't give a damn whether that

organization is a qualified government agency or a qualified private firm, so long as it is qualified.

In the EMS systems we have been hired to set up, every work force that was organized before we were hired is still organized today—and with substantially higher wages, including one system where the medics are represented by the IAFF itself. Our unionized systems are just as efficient as those without unions, and I am personally more comfortable working with unions than without unions. Before joining our firm, my own son was a dues-paying IAFF member with collective bargaining

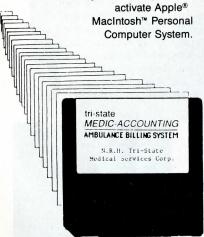


The caption in question, from the May-June issue of International Fire Fighter: "President Dominick Barbera, third from left, of Dade Co., Fla. Local 1402, confronts an official of Fourth Power, Inc., a privatization consulting firm, outside Miami hotel where firm was holding seminar. Firm was teaching city managers in the state techniques to use in breaking unions and eventually turning fire service duties over to a private firm to run fire departments and ambulance services. Nearly 100 off duty fire fighters from three IAFF locals formed a picket line around the hotel while seminar was in session."

Jack Stout has been at the forefront of innovations in the design and implementation of EMS systems for the past dozen years. If you have a question, a problem, or a solution related to the public/private interace in prehospital care, address your letter to "Interface," JEMS, P.O. Box 1026, Solana Beach, CA 92075.

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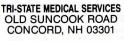
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responsibilities in his Local. I have personally negotiated union contracts with satisfying results for both sides of the table, including one which I recently negotiated with Local I-34 of the IAFF. Neither I nor my company deserve the abhorrent label, "anti-union."

So where's the dispute? The dispute, if there is one, is not "pro-union vs. anti-union," and it's not "public sector vs. private sector." The dispute is about blind allegiance to any organization, or type of organization, regardless of consequences to the patients and the community, "my sector, right or wrong."

Thom Dick said it best in the March 1988 IEMS: "Your agency is not the best in the nation. It's not the best in the state, either; in fact, it's probably not very good at all-unless you can prove it " Those terms 'good" and "best" imply comparison. Without fair comparison with other organizations, preferably the best in the business, we simply cannot know how good our own really is.

Properly conducted, bid competition provides the acid test of an organization's right to serve its community. But bid competition is also risky. Unless the rules of competition are carefully and correctly structured, the results can be misleading and can do considerable long-range damage. The fact is, most EMS procurements are so badly structured that the award is a crap-shoot.

So, am I an advocate of bid competition, or am I not? I am an advocate of properly conducted bid competition when there is good reason to use it. Otherwise I'm not. (See Interface column, "To Bid or Not to Bid," December 1987 JEMS.)

When I met Dominick Barbera at the picket line, I said there must be some mistake. I explained that our workshop was not about "privatization," but about effective contracting. I explained that, for example, California counties are required by statute to use a competitive bid process to award exclusive EMS market rights, even to a fire department. I pointed out that the internationally recognized Phoenix Fire Department got into the ambulance business by way of a bid process. I agreed with Mr. Barbera that "contracting out" should not be used to break unions

or to reduce wages. I invited Mr. Barbera and a group of the picketers to sit in on our workshop and draw their own conclusions. They declined my offer.

Ten Questions: During the course of our conversation, I asked Mr. Barbera a number of questions in search of common ground, which I'll ask you.

Question #1: If a community's private EMS organization delivers a level of service that is clearly inferior to that of similar communities investing similar financial resources, isn't there a point at which the community should consider awarding EMS responsibilities to a more capable organization?

Question #2: If the existing provider is a government agency rather than a private firm, and you work for that agency, would you answer Question #1 differently?

Question #3: If a smaller community has poor EMS and wants to contract with a larger neighboring community's fire department to provide its EMS, is that kind of "contracting

Question #4: And, if the same smaller community prefers to contract for EMS with a qualified private firm, is "contracting out" still okay with you?

Question #5: Should a chronically incompetent or economically inefficient private EMS firm be given a second chance? A third chance? A fourth chance? A fifth chance?

Question #6: Should a chronically incompetent or economically inefficient government EMS agency be given a second chance? A third chance? A fourth chance? A fifth chance?

Question #7: If your answer to Question #5 is not the same as your answer to Question #6, why should we listen to your opinions on this important subject?

Question #8: Do you believe America's worst government EMS agencies provide better service than America's best private providers?

Question #9: If your answer to Question #8 is "no," wouldn't the public be better served if the worst government EMS agencies were replaced with the best private firms?

Question #10: And if your answer to Question #8 is "yes," you don't get around much, do you?