

CITY	POPULATION	LOCAL GOVT.	PRIMARY PROVIDER	CONTACT
121. Hartford Connecticut	135,720	MC	Pri/Pri	L & M Ambulance 275 New State Road Manchester, CT 06040 (203) 647-8544  Professional Ambulance 130 Shield Street W. Hartford, CT 06110 (203) 522-1612
122. Torrance California	132,877	MC	FD-CT/DR	Torrance Fire Dept. 1701 Crenshaw Blvd. Torrance, CA 90501 (213) 618-2920
123. San Bernardino, California	130,391	MC	FD-CT/DR	San Bernardino City Fire Dept. 200 E. Third Street San Bernardino, CA 92410 (714) 383-5286
124. Evansville Indiana	130,333	MC	FD-CT/DR Pri	Evansville Fire Dept. Room 203 Civic Center Complex Evansville, IN 47708 (812) 428-2243  Alexander Ambulance 522 NW First Street Evansville, IN 47708 (812) 428-2243
125. Bakersfield California	130,210	CM	Pri/Pri	Hall Ambulance 1001 21st St. Bakersfield, CA 93301 (805) 327-4111  Golden Empire Ambulance P.O. Box 918 Bakersfield, CA 93302 (805) 325-9011

CITY	POPULATION	LOCAL GOVT.	PRIMARY PROVIDER	CONTACT
126. Garden Grove California	129,266	MC	FD-CT/DR	Garden Grove Fire Dept. 11301 Acacia Parkway Garden Grove, CA 92640 (714) 638-6721
127. Lansing Michigan	127,972	MC	FD-CT/DR	Lansing Fire Dept. 120 E. Shiawassee Lansing, MI 48933 (517) 485-7244
128. Chesapeake Virginia	126,031	MC	FD-CT/DR	Chesapeake Fire Dept. 304 Albemarle Drive Chesapeake, VA 23320 (804) 547-6297
129. Hampton Virginia	125,992	MC	FD-CT/DR	Hampton Fire Administration 22 Lincoln St. Hampton, VA 23669
130. Pasadena California	125,021	MC	FD-CT/DR	Pasadena Fire Dept. 175 N. Marengo Pasadena, CA 91101 (818) 405-4655
131. New Haven Connecticut	124,188	MC	FD-CT/DR	New Haven Fire Dept. P.O. Box 374 New Haven, CT 06502 (203) 787-6215
132. Beaumont Texas	123,356	MC	3 Svc Muni	Beaumont City Fire Dept. EMS Division 400 Walnut St. Beaumont, TX 77704 (409) 838-0894
133. Modesto California	122,234	MC	Pri	Modesto Mobile Life Support 501 15th St. Modesto, CA 95354 (209) 523-3292

## Who Really is the Primary Provider?

### Another View of the 150 City Survey

by Jack Stout

**How you ask** a question can profoundly influence the answer you get. Take a question like, "Who's the primary EMS provider in your town?" Hidden inside that question is the dangerous assumption that the person asking the question and the person being asked share an understanding about the meaning of "primary provider," not to mention "EMS." Ask for a simple answer to a complex question and you're likely to get just that—a simple answer to a complex question.

The problem is that an "EMS system," or "prehospital care system" as I prefer to call it, has several components. The person asking the question may think he's asking about the entire system, while the person answering the question is talking about the component of the system in which he is personally involved.

Consider the case of a prehospital care system in which a fire department provides first responder services (an essential function in any good system), while a contracted private firm provides most or all of the emergency transport services (also an essential function in any good system). Ask the fire chief who he thinks is the "primary EMS provider" and he'll probably tell you that it's the fire department. Ask the owner of the transport service the same question and he almost surely will tell you the "primary EMS provider" is a private firm. From their individual

perspectives, both are correct. Each organization is the "primary provider" of an essential function of the prehospital care system.

Even so, the reader may ask, who *really* is the primary provider of EMS in that kind of system? The correct answer can only be another question: "To which essential component of a modern prehospital care system are you referring?" Any other answer has to be at least slightly wrong and more than slightly misleading.

*An alternate way of asking:* Except for a few highly defined system configurations like the "public utility model" and the "failsafe franchise model," we should probably just admit that our industry is far too complex for one-line system descriptions. And since most prehospital care systems incorporate important, even essential, roles for several organizations, we may as well admit that the function of every organization involved is "primary," and that any assertion to the contrary is probably nothing more than someone's personal ego trip.

There is a way out, and I recommend its adoption for next year's *jems* survey. We can identify the major functional components of a modern prehospital care system, and ask how each function is structured in the 150 largest cities.

What you'll get is a complex answer to a complex question. □