

12 Paramedics Needed

Non-profit organization offers challenging job with a chance to serve the people.

Starting Salary—\$18,000
(wages based on merit)

Qualifications:

- Nationally Registered Paramedic
- Eligible or qualified for certification in Florida
- ACLS Certified

Good Fringe Benefits:

Medical insurance, paid holidays, paid vacation, and total fitness program.

For information or application, contact:

Ed Standtke
Tarpon Springs Memorial
Ambulance Service
301 East Lemon Street
Tarpon Springs, FL 33589
813/937-0828

Circle #112 on Reader Service Card

KETA CHEMEKETA MEKETA CHEMEKETA ETA CHEMEKETA COMMUNITY COLLEGE

Chemeketa is seeking an EMT INSTRUCTOR for leadership role in established ASSOCIATE DEGREE program. Required: RN (Bachelor's Preferred) and/or EMT IV Paramedic (Related Bachelor's Required), valid/eligible in OR; belief in/experience with paramedic role; leadership/experience in EMS/critical care; Preferred: experience teaching, varied EMS background, appropriate emergency care, instructor certifications; related BA/BS or higher; evidence of leadership in EMS.

Full time academic year assignment, competitive salary based on experience and education. Closing date 6/19/87 4:30 pm.

Contact:

Chemeketa Community College
Personnel and Affirmative Action
P.O. Box 14007
Salem, OR 97309
(503) 399-5009

Circle #114 on Reader Service Card

LETTERS

Cover Hysteria



I wish to bring to your attention some implications projected by the cover of the March 1987 issue of *jems*. The article, "Epidemic Hysteria," was scholarly and provided a timely update for healthcare professionals. The cover, on the other hand, could well have appeared on the front page of the *National Enquirer*. We are sure your intent was not to demean women, nor to use "scare" tactics but that is the initial effect of a portrait of three distraught mature females emblazoned with the label "Mass Hysteria: The Imagined Illness."

I hope you will take this criticism to heart and resume your usual professionalism.

Gail London
San Jose, California

As a woman, I resent your March 1987 cover. As a social worker (psychiatric) for many years, some of which were working with the army and Viet Nam vets, I know its not a fair or factual representation. I've come to respect *jems* and Jim Page since coming to work for EMS. This doesn't seem like something *jems* would do.

Betty Hileman, MSW
Santa Fe, New Mexico

jems replies: The cover photograph was the idea of our editorial staff, and the models are young women who work for our organization. The article expressly states that

We welcome readers' comments. Write to *jems*, P.O. Box 1026, Solana Beach, CA 92075.

epidemic hysteria is most common among young women, and uses high school cheerleaders as the case study. Perhaps we erred in using "mature females" (average age 24) instead of actual teenagers for our models, but we do feel we accurately depicted the article's emphasis on young women. On the other hand, in retrospect we can see how the cover taken alone could create a different impression than when taken in the context of the article.

One purpose of a cover is to get the reader's attention, and a tool used by almost all designers is exaggeration. We appreciate your comments, and in future cover designs we will consider the unintended effect such exaggeration might have.

Salary Controversies

I am a paramedic in Alameda County (Calif.), working in San Leandro. I have worked in the prehospital field for over two years and have observed a consistent inequity which I would like to draw attention to.

I have had the opportunity to work with many dedicated EMTs and paramedics, most of whom take their jobs very seriously, and have seen a rare breed of individuals who recommit themselves to a high level of care for their patients daily.

These are young men and women who work long shifts (24 hours) under often impossible conditions and yet are compensated far below what would be considered a "decent" wage in any other industry. The average wage for paramedics new to the field is approximately \$7.00/hour. Paramedics who have worked one to two years can expect an increase of 15 to 30 cents/hour. The incentive is great for individuals to attempt to compensate for inadequate paychecks by working overtime shifts. These additional hours, combined with the 240 hours per month (10 24-hour shifts) that most of us are already working make for an exhausted workforce.

An ideal system would be one which utilizes well-trained, well-rested, experienced paramedics who feel proud to wear the uniform and who feel they are well paid for a hard day's work. Recently I have initiated a public awareness program which is intended to enlighten Alameda County taxpayers as to how their EMS functions and what role they, as potential patients, can take in improving the expedient delivery of emergency care in their community. Along with

continued on page 9

LETTERS

continued from page 6

Edward Pennine (paramedic) I have developed an outline which shows the history of paramedicine in the U.S., why the position of paramedic was developed and what our training consists of.

In doing so, it is our hope that the citizens will support the suggestion to mandate a minimum wage for Alameda County paramedics at the next contract bidding period.

It is a sad reality that all too often those who are most experienced in prehospital care must forsake their chosen vocation because the wage standards are well below what would be considered "reasonable" in most other industries.

Martin Rosen, EMT-P
Albany, California

Your article on the common carrier in the March 1987 *jems* ("Legal File") was very good. Since private ambulance companies are considered common carriers I would like to know more about how wages and hours are calculated. There are as many ways of figuring hours as there are ambulance companies. The company I work for has 48 hour shifts but does not pay for time worked at night from 10:00 p.m. to 7:00 a.m. unless five hours of sleep time are given. The sleep time is figured on a cumulative basis which usually means crews are out working half of the night but get paid nothing. Many people have questions but know of no where to find the answers. Your help in this matter would be greatly appreciated.

Name withheld by request
Bakersfield, California

Jack Stout replies: The aforementioned letters raise complex questions regarding the application of "wage and hour" rules to EMS workers. Regardless of the rules, EMTs seem to be getting a raw deal. But perhaps there is more to the story.

An important part of our firm's system status management workshops involves such complex issues as: compensation for on-call crews; different rates of pay for mandatory vs. voluntary overtime; partial compensation based upon per-transport bonus payments; consistent compensation for crews whose hours worked per pay period may vary widely due to the nature of their shift schedule; establishing equal monthly pay among crews working both high productivity, short workweek shifts and those working lower productivity, longer workweek shifts; deliberate use of a variety of shift schedules, with shift bidding by seniority, to provide a range of choices for workers with different personal needs and lifestyle preferences; and related scheduling and compensation issues.

Over the next several months, Todd Stout and I will be completing research for a definitive *jems* article on EMS shifts, compensation, and rights of workers. The article will include results of a survey we are currently conducting to identify which workers prefer which kinds of shifts and why. Additional research on the (not always consistent) application of "wage and hour" rules, in both unionized and non-unionized firms, will also be included. In the meantime, see "New Standards for Overtime Pay" on p. 32 for some more immediate answers.

EMS Goes Back to School

Thanks for your article "EMS Goes to School" in the January 1987 *jems*. As a college student interested in possibly starting such a student-operated emergency service on campus, I found it

very informative. The population of my campus is about 4,000 with an estimated 100 ambulance calls a year. I would like to find out more about the necessary requirements and economics of such a system on both large and small campuses. In addition, I would like to find out how well the interaction works out between campus first responder units and ambulance personnel from large cities who do the transporting.

Jeffrey Gornstein
Worcester Polytechnic Institute
Worcester, Massachusetts

Gary Urbanowicz replies: I am glad to know of your interest in initiating a student-

continued on page 12

THE NAME THAT SAYS A GREAT DEAL.

The Supplier of Choice. That's what Moore Medical Corp. has become. For years, we've provided emergency medical professionals with the industry's largest selection of emergency medical supplies and equipment. Our prices are consistently the lowest in the industry. Our service is always courteous and our order turnaround is prompt, normally within 24 hours. As a result we've grown dramatically by always offering our customers a great deal...but it

doesn't end there. We're always looking to improve. Our buyers constantly search for new products and better pricing. All in the inter-

est of trying to give our customers an even better deal.

For our

latest "EMS Buyers Guide to Great Deals," call us toll-free at 1-800-243-2970 or write us at 389 John Downey Drive, New Britain, CT 06050. One look and you'll realize why Moore Medical Corp. is your supplier of choice.

MOORE.



moore
medical corp.

EMS DIVISION

©1987 Moore Medical Corp.

For More Information Circle #42 on Reader Service Card