

## GUEST COMMENT

problems, with your real top-of-the-line wrenches.

Cost-efficiency analysis is a long-term determination. And although nobody seems to have discovered it yet, good people are worth good money in the long term. Even in the Street.

*Especially in the street.* □

### The Designer Dilemma

by Jack L. Stout

Every month, as I read through my latest *jems*, I get the feeling that Thom Dick's work (on the streets and on his typewriter) is worth more than mine. I have learned to ignore the opinions of strangers (my home, my clothes, my car, and my mouth furnish proof). But opinions from Thom Dick hit home. In a funny way, I am honored that a man like Thom Dick even bothers to formulate an opinion about my work. Having read Thom's critique of the Tulsa system, my reaction is to try to explain, to beg understanding:

- that my work isn't perfect, but it's still pretty good, isn't it? or,
- that my job is to create conditions that allow others to pursue perfection, and I did; but will you hold me responsible for the work of those "others" as well? or
- that Thom works in California where everyone's wages are higher, where the cost of living is far above Tulsa's, where a firefighter/paramedic can cost taxpayers \$48,000 a year; the comparison is unfair, isn't it? or
- do you know what paramedic wages (and working conditions) were in Tulsa before we put in the system? or
- market forces control wage rates in the Tulsa system; who am I to intervene?

But Thom says if I'm good, I won't have to make excuses. Fact is, I need the excuses for my own survival . . . exactly the way most paramedics need a reason — something beyond their control — to explain their inevitable failings in the field. Medicated by explanations (i.e. excuses) for the imperfections in my work, I am able to continue, to try to do better the next time. Thank God for excuses.

Thom didn't know it, but as a result of my experience in Tulsa (now over eight years ago), I have since included minimum compensation standards in all my subsequent procurements. As a result of

my later experience in Kansas City, I now include "rest requirement" provisions for crews working extended shifts. I require that retirement programs be structured to allow medics a free choice to stay with the system or move on with the employer, when contractor turnover occurs. I encourage the growth of multi-site provider organizations and more standardized certification programs, largely to enhance mobility and career opportunities for medics. I require paramedic experience for dispatch personnel, partly to provide a job slot for medics who, for whatever reason, cannot work the streets. Still, my work falls far short of perfection.

I think a lot about this problem of paramedic compensation. I cannot accept the view that paramedicine must always be a young person's job. And I wonder

focus upon results, leaving methods and management to the creative solutions of the private sector. The alternatives are, at least to me, dismal or deadly or both — i.e., laissez faire, socialization, or bureaucratic control over the day-to-day affairs of private firms. Conservative critics have argued that the wage and working condition standards I now incorporate into post-Tulsa contracts have already violated my own procurement philosophies. I have excuses for that, too.

I have created systems which, after a few years of gaining financial momentum, can afford to pay reasonable, if not magnificent, wages. Most do. The tools of system status management (SSM) can do more than help the patient and improve efficiency. SSM can also be used to equalize workloads, detect over-

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what I can do. In an infant industry experiencing declining tax support, perverted application of anti-trust laws, tightening Medicare reimbursements, cream-skimming profiteers, the most outlandish bureaucratic bungling, and an outright war going on in the hospital industry next door, with the help of friends I have managed to carve out little havens of fair financial and political stability within which "others" can go about their work.

In several cases, we have replaced very bad systems with very good systems. But I have not created any perfect systems, and I bet I never will. That fact I both accept and hate.

By what criteria should a system be judged? If my systems are compared with hypothetical designs having no weaknesses but only strengths . . . systems designed without reality's political, financial, and legal constraints, then my work must seem pathetic and foolish. And if my systems' weaknesses are compared with the strengths of others, I can only lose the contest. But dollar-for-dollar, strength-for-strength, weakness-for-weakness . . . well, others will judge.

I firmly believe that both patients and medics will, in the long run, be better served when government learns to

load, and prevent burnout. It should be used that way.

But where does the designer's responsibility end? After eight years, is the warranty still in effect? The human temptation is to defend against Thom Dick's criticism. I must resist that temptation. Thom is right and I cannot escape my part of the responsibility. The warranty will never expire.

But Thom is part of the design. The system has what it takes to heal itself. That's its most elegant feature. The system can adapt, can survive, can improve. Listen up Tulsa. Thom has something to say.

Now, Thom, see what I've done? I've offered my excuses even though you said I shouldn't have to, "if you're good." I'm not that good. You said you were impressed, "but not totally." Join the club! □

*Editor's note: Following their written commentaries, Jack and Thom engaged in a lively discussion over the telephone. At this writing they are scheduled to meet at the EMS Today conference in Atlanta to collaborate on an article. It will take a hard look at the long-term effects of high turnover among EMTs and paramedics, with a focus on wages.*