

**Just be Nice**

**An Evaluation of Paramedic Behavior when Dealing with the Public**

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A proposed research project submitted to the Ohio Fire Executive Program

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## CERTIFICATION STATEMENT

I hereby certify that the following statements are true:

1. This paper constitutes my own product, that where the language of others is set forth, quotation marks so indicate, and that appropriate credit is given where I have used the language, ideas, expressions, or writings of another.

2. I have affirmed the use of proper spelling and grammar in this document by using the spell and grammar check functions of a word processing software program and correcting the errors as suggested by the program.

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## ABSTRACT

The problem was a vast majority of citizen complaints to the Akron Fire Department involve unprofessional behavior on an EMS call.

The purpose was to evaluate what factors influence paramedic behavior and what steps can be taken to increase the likelihood of a positive patient/medic interaction.

Descriptive research was utilized to answer four questions:

1. What factors influence how a paramedic behaves while performing EMS duties?
2. What factors have a negative influence on the paramedic/patient interaction?
3. What steps can be taken by the Akron Fire Department to increase the likelihood of a positive paramedic/patient interaction?
4. How effectively do Akron Fire Department personnel manage the human element of patient interactions?

The procedure involved conducting a Paramedic Survey and a Patient Satisfaction survey to collect data related the four research questions.

The results showed that paramedic behavior is strongly influenced by protocols, EMS training, and reaction to patient/bystander behavior. Results also indicate that public is satisfied with EMS service. Additional indications suggest AFD's tiered transport system is predisposed towards patient/medic conflicts.

Recommendations include: creating a Mission, Vision, and Values statement for AFD's EMS program; training initiatives for customer service, conflict avoidance, and communications; consider adding professional behavior guideline to protocol; create public education flyer describing AFD's tiered transportation system; and developing a customer satisfaction program to collect and analyze patient feedback.

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## INTRODUCTION

“That young man was sitting in my house, on my couch, and he was talking to me like I was dirt. I tried telling him I didn’t have a way to the hospital but he acted like he was annoyed I called 911.” These are the words of an elderly female that called to complain about how she was treated by one of the paramedics who responded to her 911 call.

During the investigation of this complaint, the young medic was astounded to learn that the patient was offended by his behavior. According to the medic, the patient had a long list of minor medical issues that didn’t require an ambulance transport. He was convinced the only reason she complained is because he wouldn’t “give her a ride to the hospital”. He had no explanation for why a patient with numerous past calls, some being non-transports, was complaining for the first time.

### **Statement of the Problem**

The City of Akron provides, by most measurable accounts, a highly effective and technically proficient Fire and Emergency Medical Service. *The problem this study will address is why a majority of citizen complaints to the Akron Fire Department report unprofessional behavior by a paramedic.*

### **Purpose of the Study**

*The purpose of this study is to research and evaluate what factors influence a paramedic’s behavior and attitude and what steps can be taken to increase the likelihood of a positive patient/medic interaction. . This information will be used to formulate strategies for the reduction of EMS-based citizen complaints.*

## **Research Method**

The research method utilized for this project was descriptive. A survey was utilized to obtain feedback from the Paramedic's perspective and from the citizen's perspective.

## **Research Questions**

*The research questions this study will investigate are:*

1. What factors influence how a paramedic behaves while performing EMS duties?
2. What factors have a negative influence on the paramedic/patient interaction?
3. What steps can be taken by the Akron Fire Department to increase the likelihood of a positive paramedic/patient interaction?
4. How effectively do Akron Fire Department personnel manage the human element of patient interactions?

## **BACKGROUND AND SIGNIFICANCE**

"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." (Angelou, 2009)

The Akron Fire Department began offering Emergency Medical Service in 1978. In the 32 years since inception, Akron's EMS system has grown from a few med units with 5,000 calls to 13 ALS units that handle more than 32,000 calls per year. In calendar 2009, the EMS Bureau received 58 complaints regarding EMS runs. Of those complaints, an estimated majority (see Limitations of Study) made mention of rude or unprofessional behavior. During that same calendar year, AFD responded to approximately 7,500 fire and service calls without a single citizen's complaint. The disparity in number of complaints becomes more puzzling when taking into consideration that Akron has a combination department which in large part utilizes the same personnel to provide Fire and EMS protection.

The Akron Fire Department has a vested interest in maintaining the trust, admiration, and support of the citizens of Akron. There hasn't been a ballot initiative for funding since 1991. The department has an authorized strength of 392 but is currently staffed at 312 due to financial constraints. The potential for needing to reach out to the electorate continues to grow. The average taxpayer in the City of Akron has very little to judge the Fire Department upon other than their personal experiences.

"The only part of the system the customer will focus on, really care about, or remember very long is the human part of the system who directly delivers service and who touches them as a human in a human and caring way." (Brunacini, 1996)

Today's multimedia environment has shone a light on the behavior of public employees all across the nation. The once unquestionable reputation of the fire service is now regularly

challenged. Citizens are bombarded by numerous sources of information that will influence their expectations. The very definition of a city employee, civil servant, implies we are here to serve the public, and that is what the public expects. With national unemployment figures hovering near 10% (Bureau of Labor Statistics, 2010), the citizenry has very little tolerance for substandard behavior from an employee who is paid with their tax dollars.

*The potential impact this study has on the Akron Fire Department is the possibility of being the catalyst for the first organized effort at addressing customer satisfaction and employee behavior standards for Akron's Emergency Medical Services.*

## LITERATURE REVIEW

Data reviewed for this project was pulled from literature produced by two target sources: the Fire and EMS Industry, and the Private Sector. Professional journals, articles and trade publications were reviewed in order to evaluate the experiences and perspectives of other organizations. Customer service literature from many private sector sources was considered for potential cross discipline relevance.

The term “customer service” was first introduced to most of the fire service by Phoenix Fire Chief Alan Brunacini with the *Essentials of Fire Department Customer Service* (1996). Brunacini’s position that the number one priority of the fire service was to “deliver the best possible service to our customers” (1996) created much debate around fire house coffee tables all across the nation. Brunacini not only stresses the importance of treating citizens as a customers, he specifically challenges that the “most consistently important and memorable part of the service delivery experience to the customer – being NICE” (1996). He further declares the key to successfully deploying this customer service model lies in the corridors of administration which bears responsibility for seeing that the organization’s priorities are well defined and supported.

Numerous studies have evaluated customer service as it relates to the fire service. Cheverie (1998) concluded that customer satisfaction played an integral role in the survival of fire based EMS. Cheverie’s study recommends the institution of customer service programs for requesting and analyzing feedback from citizens after actual EMS calls. In their study on

complaints, Colwell, Pons, and Pi (2003) assert that “Although not everyone knows what constitutes good or bad medicine, nearly everyone is very aware of the difference between good and bad behavior”.

Other works are less concerned about the “customer service” term and focus more on the manner in which paramedics treat people. Dick, Berry, Forster, and Smith (2005) set the tone for the interaction by pointing out that “emergencies are always finally defined by their owners, and not their responders.” They further diverge from the customer service moniker with the statement “EMS is not manufacturing. It is the most important people business in history.” Dick, Berry, Forster, and Smith (2005) additionally warn against marginalization of the patient by indentifying them in the terms of their illness or injury. Along those same lines, they assert that caregivers will benefit from treating people: “Don’t waste your life taking care of parts. Instead, condition yourself to take care of people. They’re infinitely more interesting...”

Trade journals are chocked full of articles regarding the importance of being nice to patients. Pianezza (2010) frames the distinction between sympathy and empathy: “To be sympathetic, you have to actually know the person and feel what he or she is feeling—have a connection with them. Empathy can be faked, and anyone can do it. Essentially, you are sorry about whatever happened to the person. It really is that simple. You don’t have to be sympathetic, but you must be empathetic to all your patients.”

An additional issue found in the literature is the pragmatic importance of keeping the public as an ally. Krato (2010) cautions: “When you work for a department/district or service,

there comes a time when you must reach out to the community for help, whether you need new equipment, a pay increase, or even to ask for support to get a board/council member elected. The thing to ask is, why should they help you?" Brueckner (2000) even describes the possible impact on urban sprawl as disenfranchised high-income consumers "vote with one's feet" and move to the suburbs.

In summary, the literature examined identifies several reasons for being nice to be people. Arguments are made suggesting a morale and ethical obligation inherent to EMS and all medical professions. Many suggest that EMS is a service industry and is therefore beholden to the tenants of customer service. Finally, there is a strong practical argument that for selfish reasons, be nice to people so they will be nice to you in some tangible way. The common thread in all of these approaches is "Always be nice – treat everyone with respect, kindness, patience and consideration." Brunacini (1996)

## PROCEDURES

The initial readings for this project were directed at previous EFO ARPs available through the NFA's Online Learning Resource Center. A review of EMS oriented research projects illuminated several considerations of the importance of the "customer service" mentality in EMS. There were no projects that dealt with the how's and why's of the relationship between medic and patient.

During the review of EFO projects, many sources of pertinent literature were discovered. These sources were helpful in evaluating trends in the fire service and in the health industry that incorporate the "customer" based business model. Literature mentioned in the Literature Review validates the importance of a positive patient/medic interaction.

A survey was used to evaluate how well Akron's EMS system satisfies the expectations of its citizens. The literature pointed to general observations about public expectations but a more specific perspective was desirable. A random sample of incident numbers from the last 6 months of 2010 was used to conduct phone interviews with a predetermined set of questions for patients and or family members present during the call.. Questions were generated with input from AFD Administration, AFD Medical Director, and AFD Quality Assurance Coordinator. Survey questions were reevaluated after 15 interviews to determine if all questions were pertinent and if other questions should be addressed. No revisions were made.

A survey was also used to examine the research questions from the paramedic's perspective. A questionnaire was developed with scaled multiple choice questions and was administered to all paramedics in the employ of the Akron Fire Department. Questions were generated with input from AFD Administration, AFD Medical Director, and AFD Quality Assurance Coordinator

### **Limitations of the Study**

Three items can be considered limiting factors for this project and all three pertain to a narrowed scope.

The literature review would benefit from additional resources that may offer alternative perspectives. Specifically, there may be insightful information obtained from academic literature, this project failed to identify those sources of literature. Additionally, the lack of literature relating to “non-profit” EMS services is a limiting factor. Most of the literature from the private sector operates on the premise that customer satisfaction equates to repeat business, which is obviously desirable for revenue generation. This perspective is in conflict however with municipal based EMS which does not want to see an increase in call volume.

Another limiting factor for this study was the inadequate availability of AFD specific data. The AFD was in transition between two reporting software programs. The research portion of the new software program had not been completed prior to the completion of this project. The old software program was no longer being utilized so recent data was unavailable. This situation made it more difficult to get verify there was an adequate cross sampling of runs that were to be utilized for the customer satisfaction survey. Furthermore, AFD does not maintain a database of citizen complaints.

The final limitation was the small number of patients surveyed for the patient satisfaction survey. AFD does not currently record patient phone numbers on the patient care report. This made it very difficult to make contact with recent patients. One hundred incident numbers were utilized for this survey. Of the one hundred patients originally identified, only eighteen were successfully interviewed for this survey. The results of the survey showed a high level of patient satisfaction but these results must be view with some degree of skepticism.

## RESULTS

An analysis of two separate surveys was performed in an attempt to examine the four research questions. The first survey was administered to all current AFD paramedics. The survey was administered in written format and then entered into the Survey Monkey research tool manually. The second survey was administered via phone interview with recent EMS patients then entered manually into the Survey Monkey research tool. Both surveys and their results can be found in their entirety in Appendix A.

The first research question to consider is: *What factors influence how a paramedic behaves while performing EMS duties?* Five survey questions from the Paramedic Survey targeted this subject (Q1, Q3, Q7, Q14, and Q15). Paramedics identified their *Protocol* as the largest influence on their behavior while on calls. The second highest rated factor was *Patient Behavior*. Other factors that received high ratings were *Departmental SOP's and Paramedic Training*. In response to the question that asked if the administration had set clear standards on how medics are to interact with patients, 65% *Agreed* and 13% *Strongly Agreed*. Items that received lower ratings in regards to their influence were *Personal Beliefs, After Midnight Calls, Example Set by Senior Medics, and Departmental Culture*. There were no additional factors identified through the "Other" option on any survey question.

The second research question posed is: *What factors have a negative influence on the paramedic/patient interaction?* Four separate survey questions explored the medic's perspective on this question (Q2, Q6, Q9, and Q10). The highest rated factor from these questions was *Intoxicated Patient*. The second highest rated factor was *Unruly Family Member or Bystander*. Additionally, *Frequent Caller* was identified as a negative stressor. Items that were determined to have a lesser negative impact were *Minor Medical Issue, Patient Under Arrest, Patient*

*Unhappy w/ Transport Decision*, and *Lack of Sleep/After Midnight Call*. There were no additional factors identified through the “Other” option.

The third research question explored through the paramedic survey is: *What steps can be taken by the Akron Fire Department to increase the likelihood of a positive paramedic/patient interaction?* Four questions related to this consideration (Q5, Q8, Q12, and Q13). In response to the question that attempted to identify what issues were important motivators to the medics, *Providing Medical Intervention* and *Making a Difference in People’s Lives* were the two highest rated items. *Contractual Benefits (Better Vacations/Comp Days)* and *Financial Benefit from Continuing Education* were the two lowest rated responses. When queried about initiatives that may influence the patient/medic interaction, *Critical Intervention Team (CIT) Training* was the highest rated suggestion. *Conflict Avoidance Training* was the next highest rated item. *Stronger Sanctions for Unprofessional Conduct* had the lowest rating. In another question, the medics were asked about how they are likely to deal with an abusive patient or bystander. The most favorable option identified is *Request APD (police) to the Scene*. The least favorable option according to ratings is *Request Supervisor to the Scene*. A separate question asked if the medics felt that patients needed “educated” about Akron’s EMS system. In response, 40% *Agreed* and 48% *Strongly Agreed*. When asked to describe what patients needed educated about, 94 responses were received with the very large majority articulating *When to call 911/What Constitutes an Emergency* and *Explaining Akron’s Transport Coding*. There were no additional factors identified through the “Other” option.

The final research question examined is: *How effectively do Akron Fire Department personnel manage the human element of patient interactions?* This question was targeted by a separate survey that was administered to recent EMS patients. The survey asked patients to rate

their satisfaction in regards to their recent EMS experience. The responses to that survey were nearly identical with 100% of the participants rating their experience with either *Satisfied* or *Very Satisfied* on each of eleven questions. These results appear to be statistically unrealistic and for the reasons enumerated in the Limitations of Study, will be viewed with suspicion.

## DISCUSSION

A subjective analysis utilizing both comparisons and contrasts between the Literature Review and Results leads to some conclusions and to some additional questions. The original stated purpose is to evaluate factors that effect paramedic behavior, and investigate what steps can be taken to reduce citizen complaints about unprofessional behavior.

The literature made multiple references to customer service. Chief Brunacini (1996) goes so far as to call customer service “Our essential mission and number one priority”. As mentioned in the Literature Review, Chief Brunacini (1996) contends that Administration has the responsibility to clearly communicate the importance of customer service to the organization. While reviewing the results of the paramedic survey, the medics clearly demonstrate their number one influencing factor is the Paramedic Protocol. A “customer service” section is conspicuously absent in AFD’s Paramedic Protocol. Additionally, a review of the table of contents for Mosby’s Paramedic Textbook, Sanders M. (2005) and Brady Essentials of Paramedic Care 2<sup>nd</sup> Edition, Bledsoe, Porter, Cherry (2006) demonstrates no mention of customer service either. Even with that in mind, when the medics were asked if they agreed with the “treat patients like you want your family to be treated” rule of thumb, 96% *Agreed* or *Strongly Agreed* which would seem to indicate a predisposition towards a customer service mentality. That same question would also suggest a healthy inclination towards empathy which was stressed by Pianezza (2010).

Another conspicuous absence is pointed out by the question that asked medics if they felt Administration had set clear standards for dealing with patients. While 80% percent answered in the affirmative, a 20% negative response could be considered unfavorable. A review of AFD’s 2009 Annual Report reveals a lack of Mission, Vision, and Values Statements for the EMS

Bureau. And once again, neither AFD's Paramedic Protocol nor leading Paramedic Textbooks address a standard of conduct for dealing with patients.

Further consideration of the survey results points to another possible conflict with accepted professional opinions. Dick, Berry, Forster, and Smith (2005) contended that "[EMS] is the most important people business in history" and that medics should "condition yourself to take care of people" (as opposed to "parts"). Survey results speak clearly to the fact that the number one factor that our paramedics find gratifying is *Providing Medical Intervention*. And in supporting contrast, their biggest frustration was *Abuses of the EMS System*. It could be argued that the positive response to *Making a difference in People's Lives* suggests an agreement with Dick, Berry, Forster, and Smith's (2005) positions but when taken in context of the entire survey, I would contend that the medics were indicating satisfaction from making a "clinical" difference in people's lives.

Possibly the largest disparity between observations made during the literature review and the survey results would be involving the "educating the public" question. The medics were asked if they felt the public needed "educated" about our EMS system. An overwhelming majority, 88%, *Agreed* or *Strongly Agreed*. When asked to describe in their own words what the public needed "educated" about, over 75% responded with some version of "*what constitutes a true emergency*". These two items were the most agreed upon subject of the entire survey. These results are a direct contradiction of Dick, Berry, Forster, and Smith's (2005) position that "emergencies are always finally defined by their owners, and not their responders."

It would be encouraging to consider the large percentage of positive responses to the Patient Satisfaction Survey but as mentioned in the Limitations section, the group of respondents was small and not statistically diverse. The difficulties experienced in obtaining these survey

responses serves as a confirming example of the suggestion by Cheverie (1998) that EMS organizations institute customer service programs for requesting and analyzing feedback from citizens after actual EMS calls. There is no vehicle currently in place for EMS Administration to communicate with recent EMS patients.

When considering the Paramedic Survey in its entirety, a couple of trends become apparent. The group seems to be indicating that they take their responsibility to provide Emergency Medical Service, in the literal sense, very seriously. The medics make it clear that they utilize their protocol and training as a compass for providing that service. It is also very clear that the medics feel that the behavior of the patient has a very large role in how smoothly the call goes. In multiple questions, the medics indicated that the patient or bystanders as having a large influence on negative outcomes. Their frustration with *Abuses of the EMS System* and their strong concurrence about the *Public's need for Education on True Emergencies* would suggest that they have less concern for the non-clinical aspects of pre-hospital care.

After contemplation of the Surveys versus the Literature Review, one answer came into clear focus. The original problem was stated to be that a large percentage of citizen complaints about EMS involve an attitude component. A logical path to that answer starts with Colwell, Pons, and Pi's (2003) assertion that "Although not everyone knows what constitutes good or bad medicine, nearly everyone is very aware of the difference between good and bad behavior". It could be argued that while that statement is basically true, everyone's perspective of good and bad behavior is very closely linked to the context of events and the expectations of the "perceiver". Consider the situation when a citizen feels they are having a medical emergency and calls 911 only to be told by the medics that their situation is not urgent and does not require an ambulance transport. How perfect must the medics behave in order to overcome the tension

caused by this difference of perception? And when compared to fire calls, it is easy to see why there is a large disparity in citizen complaints. Even when a fire truck goes out to for “squirrel in the house”, we actually try to get the squirrel. The crew may be less than thrilled but they still attempt to solve the problem the citizen called for. When a medical unit responds to someone’s home and then informs them after careful evaluation that their sickness isn’t a “real emergency”, how likely are they to feel offended? This observation doesn’t relieve the medics of responsibility for unpleasant interactions with the public. It increases the responsibility of the EMS System to recognize, and prepare for the inevitable conflict that is inherent with a system that does not transport all patients. It is important for us to remember that there is one very large difference when a “customer service” model is applied to a municipal EMS system; we’re not trying to generate more business through positive employee behavior. But we certainly want them to feel satisfied with the experience when they do call.

It is unfortunate that the Patient Satisfaction Survey was unable to obtain an acceptable cross section of patients in regards to the transport dispositions. It is clearly in the organization’s best interest to continue exploring patient satisfaction scores as they relate to AFD transports versus private ambulance transports versus non-transports.

The results of these surveys offer an opportunity for the Akron Fire Department’s Administration to examine the real life challenges of the paramedic/patient interaction as perceived by both parties. A careful evaluation from different viewpoints within the chain of command can serve as a catalyst for change initiatives that will be based on substantive data.

## RECOMMENDATIONS

A widely accepted leadership theory is to make sure your people have the needed tools and training then get out of their way. This concept is the guiding principle behind the following recommendations for utilizing the data and analysis made available through this study.

1. Mission, Vision, and Values Statements
  - a. The EMS Bureau should oversee the development of a Mission Statement with accompanying Vision and Values Statements that are conceived in a collaborative effort with current paramedics and are endorsed by AFD's Administration.
2. Additional Training for AFD Paramedics
  - a. Coordination should proceed with the EMS Bureau, the Quality Assurance Coordinator, and the Medical Control Physician to develop, implement, or arrange for appropriate training in the following areas:
    - i. Customer Satisfaction
    - ii. Conflict Avoidance
    - iii. Crisis Intervention Training (starting with Paramedic Lieutenants)
    - iv. Communication Training specific to patient interviewing
3. Review Paramedic Protocol
  - a. Coordination should proceed with the EMS Bureau, the Quality Assurance Coordinator, and the Medical Control Physician for review of the current Paramedic Protocol with consideration of adding a Professional Behavior Guideline.

#### 4. Public Education Flyer

- a. Coordination should proceed with AFD Administration, the EMS Bureau, the Quality Assurance Coordinator, and the City of Akron Law Department for the development of a public education flyer or handout that can be utilized by the medics to help explain the details of AFD's EMS transportation coding.

#### 5. Patient Satisfaction Program

- a. The EMS Bureau should oversee the development and implementation of a Patient Satisfaction Program that will request and analyze feedback from recent EMS patients. This program should ensure that feedback is solicited from all patient populations.

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**APPENDIX 1 – AKRON FIRE PARAMEDIC SURVEY**

# 1. EMS Survey Questions

## 1. How do the following items influence your behavior when interacting with patients? (Please rate each item)

	No Influence	Minor Influence	Moderate Influence	Considerable Influence
After midnight call	ja	ja	ja	ja
EMS training	ja	ja	ja	ja
Example set by senior medics	ja	ja	ja	ja
Nature of call	ja	ja	ja	ja
Patient behavior	ja	ja	ja	ja
Personal beliefs	ja	ja	ja	ja
Professional standards	ja	ja	ja	ja
Protocol	ja	ja	ja	ja
Other (please specify)				
<input type="text"/>				

## 2. The items below are often mentioned as frustrating for Akron Fire Paramedics. Please rate the frustration for you.

	Not frustrating			Very frustrating	
"Abuses" of the EMS system	ja	ja	ja	ja	ja
Added responsibility (compared to EMT)	ja	ja	ja	ja	ja
Added work load (compared to EMT)	ja	ja	ja	ja	ja
Calls after midnight	ja	ja	ja	ja	ja
Lack of pay differential	ja	ja	ja	ja	ja
Lack of recovery time/poor rotation	ja	ja	ja	ja	ja
Other (please specify)					
<input type="text"/>					

## 3. Please rate your response to the following statement:

**"Treat patients like you want your family to be treated" is a good rule of thumb for EMS.**

	Strongly Disagree	Disagree	Agree	Strongly Agree
Agree or Disagree?	ja	ja	ja	ja

**4. If you selected "Agree" or "Strongly Agree" to question 3, what percent of the time are you successful in treating patients like you want your family to be treated?**

90% - 100%

80% - 90%

70% - 80%

less than 70%

Not Applicable

**5. In regards to what you find enjoyable about being a paramedic, please rate the following items:**

	Not important				Very important
Being a role model in the community	<input type="radio"/>				
Contractual benefits (Better vacations/comp days)	<input type="radio"/>				
Exciting/Interesting Calls	<input type="radio"/>				
Financial benefit from Continuing Education	<input type="radio"/>				
Making a difference in people's lives	<input type="radio"/>				
Providing medical intervention	<input type="radio"/>				
Other (please specify)	<input type="text"/>				

**6. Which of the following factors are likely to have a negative influence on your interaction with the patient?**

	Not likely				Very likely
Intoxicated patient	<input type="radio"/>				
Lack of sleep/after midnight	<input type="radio"/>				
Minor Emergency/"Unnecessary Call"	<input type="radio"/>				
Pt unhappy w/ transport decision	<input type="radio"/>				
Unprofessional Crew Member (AFD)	<input type="radio"/>				
Unruly family member or bystander	<input type="radio"/>				
Other (please specify)	<input type="text"/>				

**7. Please rate your response to the following statement:**

**If my partner is getting upset with a patient, it is my responsibility to help diffuse the conflict.**

	strongly disagree	disagree	agree	strongly agree
Agree or Disagree?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**8. When dealing with a verbally abusive patient or bystander, I am most likely**

**to:** \_\_\_\_\_

	Not likely			Very likely	
Ignore the patient/bystander's behavior	<input type="radio"/>				
Request a supervisor to the scene	<input type="radio"/>				
Request APD to the scene	<input type="radio"/>				
Set the patient/bystander straight myself	<input type="radio"/>				
Other (please specify)	<input type="text"/>				

**9. In your opinion, which type of patient is most difficult to deal with?**

	Not difficult			Very difficult	
Frequent Caller	<input type="radio"/>				
Intoxicated	<input type="radio"/>				
Minor Medical Issue	<input type="radio"/>				
Psych Problem	<input type="radio"/>				
Under Arrest	<input type="radio"/>				
Other (please specify)	<input type="text"/>				

**10. Please rate your response to the following statement:**

**Patients often need to be educated about Akron's EMS system.**

	Strongly Disagree	Disagree	Agree	Strongly Agree
Agree or Disagree?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**11. If you selected "Agree" or "Strongly Agree" for question 10, please describe in your own words what you feel patients need educated about with regard to Akron's EMS system.**

**12. When you feel your partner has been unprofessional with a patient, which course of action are you most likely to take?**

	Not likely			Very likely	
Discuss issue with other medics	jn	jn	jn	jn	jn
Express your concerns directly to your partner	jn	jn	jn	jn	jn
Inform your company officer	jn	jn	jn	jn	jn
Report problem to administration	jn	jn	jn	jn	jn
Shrug it off as a bad day	jn	jn	jn	jn	jn
Other (please specify)	<input type="text"/>				

**13. In your opinion, please rate the following items in regards to their possible influence on the patient/medic interaction.**

	Very negative influence	Negative influence	No influence	Positive influence	Very positive influence
Conflict avoidance training	jn	jn	jn	jn	jn
Crisis intervention team (CIT) training	jn	jn	jn	jn	jn
Develop a paramedic code of conduct	jn	jn	jn	jn	jn
Specific SOP's for citizen/patient interactions	jn	jn	jn	jn	jn
Stronger sanctions for unprofessional conduct	jn	jn	jn	jn	jn
Other (please specify)	<input type="text"/>				

**14. In regards to how you should interact with patients, please rate the importance (to you) of the following factors.**

	Not important			Very important	
Departmental culture	jn	jn	jn	jn	jn
Departmental rules and regulations	jn	jn	jn	jn	jn
Departmental SOPs	jn	jn	jn	jn	jn
Paramedic protocol	jn	jn	jn	jn	jn
Paramedic training	jn	jn	jn	jn	jn
Other (please specify)	<input type="text"/>				

**15. Please rate your response to the following statement:**

**Our Administration has set very clear standards for how I am to interact with patients and their families.**

	Strongly disagree	Disagree	Agree	Strongly agree
Agree or Disagree?	jn	jn	jn	jn

## 2. Biographical Data

**16. How many years service do you have with the Akron Fire Department?**

**17. How many years have you been a paramedic with the State of Ohio?**

**18. Of the 6 shift days in a three week work cycle, how many days are you assigned to a straight fire apparatus?**

**19. Are you normally assigned to a 2 person med unit or a combo unit?**

2 Person Med Unit

Combo Med Unit

**20. To the best of your knowledge, how many calls a day does your normally assigned med unit respond to?**

**21. Are you male or female?**

Male

Female

**22. In regards to your contractual obligation to be a paramedic, which item describes your circumstance?**

Still under contractual obligation to be a paramedic

Surpassed contractual minimum years as a paramedic and have unsuccessfully attempted to bid out

Surpassed contractual minimum years as a paramedic and have not attempted to bid out

**APPENDIX 2 - PATIENT SATISFACTION SURVEY**

## 1. Patient Questions

### 1. How satisfied are you with how the paramedics cared about you as a person?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied ?	ja	ja	ja	ja	ja

Other (please specify)

### 2. How satisfied are you that the paramedics took your problem seriously?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	ja	ja	ja	ja	ja

Other (please specify)

### 3. How satisfied are you with how the paramedics were reassuring to you?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	ja	ja	ja	ja	ja

Other (please specify)

### 4. How satisfied are you with how the paramedics answered your questions or concerns?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	ja	ja	ja	ja	ja

Other (please specify)

### 5. How satisfied are you with how the paramedics were pleasant or courteous?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	ja	ja	ja	ja	ja

Other (please specify)

### 6. How satisfied are you with how the paramedics listened to you and/or your family?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	ja	ja	ja	ja	ja

Other (please specify)

### 7. How satisfied are you with how the paramedics presented a professional demeanor?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	ja	ja	ja	ja	ja

Other (please specify)

**8. If you were NOT transported by Akron Fire Department Medics, how satisfied are you with how the paramedics explained why they didn't transport you?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	N/A
Unsatisfied or Satisfied?	<input type="radio"/>					

Other (please specify)

**9. How satisfied are you that your care was the paramedics' top priority?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	<input type="radio"/>				

Other (please specify)

**10. How satisfied are you with the paramedics' technical abilities?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied
Unsatisfied or Satisfied?	<input type="radio"/>				

Other (please specify)

**11. What would you like the Akron Fire Department to know about your experience with EMS?**

**2. Details regarding patient and call (from PCR)**

**1. Was the patient, or patient's family member interviewed?**

Patient

Family member

**2. What is the age of the patient?**

**3. Is the patient Male or Female?**

Male

Female

**4. What transport Code was assigned to the run?**

- Code 1
- Code 2
- Code 2C
- Code 3
- Code 3C
- Pt Refusal

**5. Which Med Unit responded to this call?**

- |                             |                              |                              |
|-----------------------------|------------------------------|------------------------------|
| <input type="radio"/> Med 2 | <input type="radio"/> Med 7  | <input type="radio"/> Med 12 |
| <input type="radio"/> Med 3 | <input type="radio"/> Med 8  | <input type="radio"/> Med 13 |
| <input type="radio"/> Med 4 | <input type="radio"/> Med 9  | <input type="radio"/> Med 14 |
| <input type="radio"/> Med 5 | <input type="radio"/> Med 10 |                              |
| <input type="radio"/> Med 6 | <input type="radio"/> Med 11 |                              |

**6. What Shift responded to this call?**

- A Shift
- B Shift
- C Shift

**7. What time of day did this call take place?**

- 0601 - 1200
- 1201 - 1800
- 1801 - 2400
- 0001 - 0600

**8. What Chief Complaint is listed on the PCR?**

**9. What Impression is listed on the PCR?**

**10. How was the Med Unit Staffed?**

- 2 Personnel, no Officer
- 2 Personnel, 1 Officer
- Combo (3 or more), with Officer
- Combo (3 or more), with Acting Officer

**APPENDIX 3 – AKRON FIRE PARAMEDIC SURVEY RESULTS**

**1. How do the following items influence your behavior when interacting with patients?  
(Please rate each item)**

	No Influence	Minor Influence	Moderate Influence	Considerable Influence	Rating Average	Response Count
Patient behavior	6.3% (8)	16.5% (21)	<b>38.6% (49)</b>	<b>38.6% (49)</b>	3.09	127
EMS training	<b>31.0% (39)</b>	22.2% (28)	21.4% (27)	25.4% (32)	2.41	126
Example set by senior medics	20.3% (26)	<b>34.4% (44)</b>	23.4% (30)	21.9% (28)	2.47	128
Personal beliefs	<b>43.0% (55)</b>	34.4% (44)	13.3% (17)	9.4% (12)	1.89	128
After midnight call	25.0% (32)	<b>41.4% (53)</b>	25.8% (33)	7.8% (10)	2.16	128
Nature of call	11.0% (14)	26.0% (33)	<b>34.6% (44)</b>	28.3% (36)	2.80	127
Protocol	12.0% (15)	10.4% (13)	28.8% (36)	<b>48.8% (61)</b>	3.14	125
Professional standards	15.7% (20)	11.0% (14)	34.6% (44)	<b>38.6% (49)</b>	2.96	127
				Other (please specify)		4
<b>answered question</b>						<b>128</b>
<b>skipped question</b>						<b>0</b>

**2. The items below are often mentioned as frustrating for Akron Fire Paramedics. Please rate the frustration for you.**

	Not frustrating				Very frustrating	Rating Average	Response Count
Added responsibility (compared to EMT)	17.3% (22)	15.7% (20)	18.9% (24)	<b>24.4% (31)</b>	23.6% (30)	3.21	127
Added work load (compared to EMT)	14.3% (18)	15.1% (19)	18.3% (23)	24.6% (31)	<b>27.8% (35)</b>	3.37	126
Lack of pay differential	12.9% (16)	9.7% (12)	15.3% (19)	23.4% (29)	<b>38.7% (48)</b>	3.65	124
"Abuses" of the EMS system	1.6% (2)	9.4% (12)	12.6% (16)	22.0% (28)	<b>54.3% (69)</b>	4.18	127
Lack of recovery time/poor rotation	6.3% (8)	18.1% (23)	24.4% (31)	22.0% (28)	<b>29.1% (37)</b>	3.50	127
Calls after midnight	15.0% (19)	<b>29.9% (38)</b>	28.3% (36)	18.9% (24)	7.9% (10)	2.75	127
					Other (please specify)		10
					<b>answered question</b>		<b>127</b>
					<b>skipped question</b>		<b>1</b>

**3. Please rate your response to the following statement: "Treat patients like you want your family to be treated" is a good rule of thumb for EMS.**

	Strongly Disagree	Disagree	Agree	Strongly Agree	Rating Average	Response Count
Agree or Disagree?	2.3% (3)	0.8% (1)	40.6% (52)	<b>56.3% (72)</b>	3.51	128
					<b>answered question</b>	<b>128</b>
					<b>skipped question</b>	<b>0</b>

**4. If you selected "Agree" or "Strongly Agree" to question 3, what percent of the time are you successful in treating patients like you want your family to be treated?**

		Response Percent	Response Count
90% - 100%		45.7%	58
80% - 90%		44.1%	56
70% - 80%		7.9%	10
less than 70%		1.6%	2
Not Applicable		0.8%	1
<b>answered question</b>			<b>127</b>
<b>skipped question</b>			<b>1</b>

**5. In regards to what you find enjoyable about being a paramedic, please rate the following items:**

	<b>Not important</b>				<b>Very important</b>	<b>Rating Average</b>	<b>Response Count</b>
Providing medical intervention	4.7% (6)	6.3% (8)	23.4% (30)	<b>35.2% (45)</b>	30.5% (39)	3.80	128
Financial benefit from Continuing Education	16.5% (21)	15.0% (19)	20.5% (26)	<b>27.6% (35)</b>	20.5% (26)	3.20	127
Contractual benefits (Better vacations/comp days)	<b>30.5% (39)</b>	21.9% (28)	21.1% (27)	14.1% (18)	12.5% (16)	2.56	128
Exciting/Interesting Calls	7.9% (10)	13.4% (17)	27.6% (35)	<b>28.3% (36)</b>	22.8% (29)	3.45	127
Being a role model in the community	12.5% (16)	14.8% (19)	20.3% (26)	<b>30.5% (39)</b>	21.9% (28)	3.34	128
Making a difference in people's lives	5.5% (7)	7.8% (10)	26.6% (34)	27.3% (35)	<b>32.8% (42)</b>	3.74	128
					Other (please specify)		1
					<b>answered question</b>		<b>128</b>
					<b>skipped question</b>		<b>0</b>

**6. Which of the following factors are likely to have a negative influence on your interaction with the patient?**

	Not likely				Very likely	Rating Average	Response Count
Lack of sleep/after midnight	16.4% (21)	<b>28.1% (36)</b>	25.0% (32)	22.7% (29)	7.8% (10)	2.77	128
Intoxicated patient	7.8% (10)	17.2% (22)	<b>30.5% (39)</b>	26.6% (34)	18.0% (23)	3.30	128
Minor Emergency/"Unnecessary Call"	15.6% (20)	21.9% (28)	22.7% (29)	<b>23.4% (30)</b>	16.4% (21)	3.03	128
Unprofessional Crew Member (AFD)	18.9% (24)	21.3% (27)	16.5% (21)	20.5% (26)	<b>22.8% (29)</b>	3.07	127
Pt unhappy w/ transport decision	22.7% (29)	25.8% (33)	<b>28.1% (36)</b>	17.2% (22)	6.3% (8)	2.59	128
Unruly family member or bystander	8.7% (11)	13.4% (17)	25.2% (32)	<b>30.7% (39)</b>	22.0% (28)	3.44	127
					Other (please specify)		3
					<b>answered question</b>		<b>128</b>
					<b>skipped question</b>		<b>0</b>

**7. Please rate your response to the following statement: If my partner is getting upset with a patient, it is my responsibility to help diffuse the conflict.**

	strongly disagree	disagree	agree	strongly agree	Rating Average	Response Count
Agree or Disagree?	1.6% (2)	0.8% (1)	<b>52.3% (67)</b>	45.3% (58)	3.41	128
					<b>answered question</b>	<b>128</b>
					<b>skipped question</b>	<b>0</b>

**8. When dealing with a verbally abusive patient or bystander, I am most likely to: \_\_\_\_\_**

	Not likely			Very likely		Rating Average	Response Count
Set the patient/bystander straight myself	11.1% (14)	31.7% (40)	<b>46.0% (58)</b>	11.1% (14)		2.57	126
Ignore the patient/bystander's behavior	25.8% (33)	<b>35.9% (46)</b>	28.9% (37)	9.4% (12)		2.22	128
Request APD to the scene	2.4% (3)	10.4% (13)	39.2% (49)	<b>48.0% (60)</b>		3.33	125
Request a supervisor to the scene	<b>57.5% (73)</b>	25.2% (32)	11.8% (15)	5.5% (7)		1.65	127
				Other (please specify)			3
<b>answered question</b>							<b>128</b>
<b>skipped question</b>							<b>0</b>

### 9. In your opinion, which type of patient is most difficult to deal with?

	Not difficult			Very difficult	Rating Average	Response Count	
Intoxicated	4.7% (6)	15.0% (19)	28.3% (36)	<b>29.9% (38)</b>	22.0% (28)	3.50	127
Psych Problem	23.4% (30)	<b>26.6% (34)</b>	23.4% (30)	20.3% (26)	6.3% (8)	2.59	128
Under Arrest	25.6% (32)	<b>30.4% (38)</b>	21.6% (27)	15.2% (19)	7.2% (9)	2.48	125
Minor Medical Issue	<b>37.8% (48)</b>	32.3% (41)	16.5% (21)	10.2% (13)	3.1% (4)	2.09	127
Frequent Caller	15.6% (20)	18.0% (23)	21.1% (27)	<b>24.2% (31)</b>	21.1% (27)	3.17	128
					Other (please specify)		2

answered question 128

skipped question 0

### 10. Please rate your response to the following statement: Patients often need to be educated about Akron's EMS system.

	Strongly Disagree	Disagree	Agree	Strongly Agree	Rating Average	Response Count
Agree or Disagree?	1.6% (2)	9.4% (12)	40.9% (52)	<b>48.0% (61)</b>	3.35	127
					answered question	127
					skipped question	1

**11. If you selected "Agree" or "Strongly Agree" for question 10, please describe in your own words what you feel patients need educated about with regard to Akron's EMS system.**

	Response Count
	94
<b>answered question</b>	<b>94</b>
<b>skipped question</b>	<b>34</b>

**12. When you feel your partner has been unprofessional with a patient, which course of action are you most likely to take?**

	Not likely				Very likely	Rating Average	Response Count
Express your concerns directly to your partner	6.3% (8)	1.6% (2)	7.9% (10)	33.3% (42)	<b>50.8% (64)</b>	4.21	126
Inform your company officer	<b>36.1% (44)</b>	27.9% (34)	19.7% (24)	9.8% (12)	6.6% (8)	2.23	122
Discuss issue with other medics	<b>27.4% (34)</b>	22.6% (28)	18.5% (23)	22.6% (28)	8.9% (11)	2.63	124
Report problem to administration	<b>76.8% (96)</b>	15.2% (19)	5.6% (7)	0.8% (1)	1.6% (2)	1.35	125
Shrug it off as a bad day	20.6% (26)	25.4% (32)	<b>37.3% (47)</b>	11.9% (15)	4.8% (6)	2.55	126
						Other (please specify)	5
						<b>answered question</b>	<b>126</b>
						<b>skipped question</b>	<b>2</b>

**13. In your opinion, please rate the following items in regards to their possible influence on the patient/medic interaction.**

	Very negative influence	Negative influence	No influence	Positive influence	Very positive influence	Rating Average	Response Count
Conflict avoidance training	0.8% (1)	1.6% (2)	<b>47.6% (60)</b>	45.2% (57)	4.8% (6)	3.52	126
Develop a paramedic code of conduct	1.6% (2)	4.0% (5)	<b>55.6% (70)</b>	31.7% (40)	7.1% (9)	3.39	126
Stronger sanctions for unprofessional conduct	13.6% (17)	23.2% (29)	<b>30.4% (38)</b>	23.2% (29)	9.6% (12)	2.92	125
Specific SOP's for citizen/patient interactions	3.2% (4)	11.1% (14)	<b>52.4% (66)</b>	28.6% (36)	4.8% (6)	3.21	126
Crisis intervention team (CIT) training	0.0% (0)	0.8% (1)	39.7% (50)	<b>46.0% (58)</b>	13.5% (17)	3.72	126
					Other (please specify)		4
					<b>answered question</b>		<b>126</b>
					<b>skipped question</b>		<b>2</b>

**14. In regards to how you should interact with patients, please rate the importance (to you) of the following factors.**

	Not important				Very important	Rating Average	Response Count
Paramedic training	4.0% (5)	6.4% (8)	22.4% (28)	<b>39.2% (49)</b>	28.0% (35)	3.81	125
Paramedic protocol	3.9% (5)	6.3% (8)	17.3% (22)	<b>38.6% (49)</b>	33.9% (43)	3.92	127
Departmental culture	18.1% (23)	18.1% (23)	<b>26.0% (33)</b>	23.6% (30)	14.2% (18)	2.98	127
Departmental SOPs	5.5% (7)	9.4% (12)	26.0% (33)	<b>40.2% (51)</b>	18.9% (24)	3.57	127
Departmental rules and regulations	5.5% (7)	8.7% (11)	27.6% (35)	<b>40.2% (51)</b>	18.1% (23)	3.57	127

Other (please specify) 7

answered question 127

skipped question 1

**15. Please rate your response to the following statement: Our Administration has set very clear standards for how I am to interact with patients and their families.**

	Strongly disagree	Disagree	Agree	Strongly agree	Rating Average	Response Count
Agree or Disagree?	3.2% (4)	17.6% (22)	<b>65.6% (82)</b>	13.6% (17)	2.90	125

answered question 125

skipped question 3

**16. How many years service do you have with the Akron Fire Department?**

	<b>Response Count</b>
	125
<b>answered question</b>	<b>125</b>
<b>skipped question</b>	<b>3</b>

**17. How many years have you been a paramedic with the State of Ohio?**

	<b>Response Count</b>
	125
<b>answered question</b>	<b>125</b>
<b>skipped question</b>	<b>3</b>

**18. Of the 6 shift days in a three week work cycle, how many days are you assigned to a straight fire apparatus?**

	<b>Response Count</b>
	124
<b>answered question</b>	<b>124</b>
<b>skipped question</b>	<b>4</b>

**19. Are you normally assigned to a 2 person med unit or a combo unit?**

		Response Percent	Response Count
2 Person Med Unit		20.2%	25
Combo Med Unit		79.8%	99
		answered question	124
		skipped question	4

**20. To the best of your knowledge, how many calls a day does your normally assigned med unit respond to?**

		Response Count	
		115	
		answered question	115
		skipped question	13

**21. Are you male or female?**

		Response Percent	Response Count
Male		95.2%	118
Female		4.8%	6
		answered question	124
		skipped question	4

**22. In regards to your contractual obligation to be a paramedic, which item describes your circumstance?**

		Response Percent	Response Count
Still under contractual obligation to be a paramedic		24.0%	30
Surpassed contractual minimum years as a paramedic and have unsuccessfully attempted to bid out		4.8%	6
<b>Surpassed contractual minimum years as a paramedic and have not attempted to bid out</b>		71.2%	89
		<b>answered question</b>	<b>125</b>
		<b>skipped question</b>	<b>3</b>

**APPENDIX 4 - PATIENT SATISFACTION SURVEY RESULTS**

# Patient Satisfaction Survey



## 1. How satisfied are you with how the paramedics cared about you as a person?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied ?	0.0% (0)	0.0% (0)	0.0% (0)	47.4% (9)	52.6% (10)	4.53	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

## 2. How satisfied are you that the paramedics took your problem seriously?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	31.6% (6)	68.4% (13)	4.68	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

## 3. How satisfied are you with how the paramedics were reassuring to you?

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	42.1% (8)	57.9% (11)	4.58	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

**4. How satisfied are you with how the paramedics answered your questions or concerns?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	31.6% (6)	68.4% (13)	4.68	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

**5. How satisfied are you with how the paramedics were pleasant or courteous?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	10.5% (2)	36.8% (7)	52.6% (10)	4.42	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

**6. How satisfied are you with how the paramedics listened to you and/or your family?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	55.6% (10)	44.4% (8)	4.44	18
					Other (please specify)		0
					<b>answered question</b>		<b>18</b>
					<b>skipped question</b>		<b>1</b>

**7. How satisfied are you with how the paramedics presented a professional demeanor?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	47.4% (9)	52.6% (10)	4.53	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

**8. If you were NOT transported by Akron Fire Department Medics, how satisfied are you with how the paramedics explain why they didn't transport you?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	N/A	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	5.3% (1)	0.0% (0)	21.1% (4)	26.3% (5)	47.4% (9)	4.30	19
						Other (please specify)		0
						<b>answered question</b>		<b>19</b>
						<b>skipped question</b>		<b>0</b>

**9. How satisfied are you that your care was the paramedics' top priority?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	42.1% (8)	57.9% (11)	4.58	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

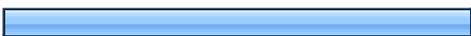
**10. How satisfied are you with the paramedics' technical abilities?**

	Very unsatisfied	Unsatisfied	No opinion	Satisfied	Very satisfied	Rating Average	Response Count
Unsatisfied or Satisfied?	0.0% (0)	0.0% (0)	0.0% (0)	42.1% (8)	57.9% (11)	4.58	19
					Other (please specify)		0
					<b>answered question</b>		<b>19</b>
					<b>skipped question</b>		<b>0</b>

**11. What would you like the Akron Fire Department to know about your experience with EMS?**

	Response Count
	3
	<b>answered question</b> 3
	<b>skipped question</b> 16

**12. Was the patient, or patient's family member interviewed?**

	Response Percent	Response Count
Patient	 70.6%	12
Family member	 29.4%	5
	<b>answered question</b>	<b>17</b>
	<b>skipped question</b>	<b>2</b>

**13. What is the age of the patient?**

	Response Count
	8
<b>answered question</b>	<b>8</b>
<b>skipped question</b>	<b>11</b>

**14. Is the patient Male or Female?**

		Response Percent	Response Count
Male		47.1%	8
Female		52.9%	9
<b>answered question</b>			<b>17</b>
<b>skipped question</b>			<b>2</b>

**15. What transport Code was assigned to the run?**

		Response Percent	Response Count
Code 1		17.6%	3
<b>Code 2</b>		<b>41.2%</b>	<b>7</b>
Code 2C		5.9%	1
Code 3		35.3%	6
Code 3C		0.0%	0
Pt Refusal		0.0%	0
<b>answered question</b>			<b>17</b>
<b>skipped question</b>			<b>2</b>

16. Which Med Unit responded to this call?

		Response Percent	Response Count
Med 2		11.8%	2
Med 3		5.9%	1
Med 4		0.0%	0
Med 5		5.9%	1
Med 6		11.8%	2
Med 7		5.9%	1
Med 8		5.9%	1
Med 9		5.9%	1
<b>Med 10</b>		<b>17.6%</b>	<b>3</b>
Med 11		5.9%	1
Med 12		11.8%	2
Med 13		11.8%	2
Med 14		0.0%	0
<b>answered question</b>			<b>17</b>
<b>skipped question</b>			<b>2</b>

**17. What Shift responded to this call?**

		Response Percent	Response Count
A Shift		35.3%	6
<b>B Shift</b>		<b>47.1%</b>	<b>8</b>
C Shift		17.6%	3
<b>answered question</b>			<b>17</b>
<b>skipped question</b>			<b>2</b>

**18. What time of day did this call take place?**

		Response Percent	Response Count
0601 - 1200		31.3%	5
<b>1201 - 1800</b>		<b>68.8%</b>	<b>11</b>
1801 - 2400		0.0%	0
0001 - 0600		0.0%	0
<b>answered question</b>			<b>16</b>
<b>skipped question</b>			<b>3</b>

**19. What Chief Complaint is listed on the PCR?**

	Response Count
	16
<b>answered question</b>	<b>16</b>
<b>skipped question</b>	<b>3</b>

**20. What Impression is listed on the PCR?**

	Response Count
	16
<b>answered question</b>	<b>16</b>
<b>skipped question</b>	<b>3</b>

**21. How was the Med Unit Staffed?**

		Response Percent	Response Count
2 Personnel, no Officer		17.6%	3
2 Personnel, 1 Officer		0.0%	0
<b>Combo (3 or more), with Officer</b>		<b>82.4%</b>	<b>14</b>
Combo (3 or more), with Acting Officer		0.0%	0
	<b>answered question</b>		<b>17</b>
	<b>skipped question</b>		<b>2</b>