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STREETBEAT

Detroit EMS Technician Newsletter

Fall 2014

Suite Dreams, Gardner-White, WXYZ and Metro Detroit come together to support Detroit EMS

Detroit EMS received new furniture for their stations through the efforts of WXYZ television. Ronnie Dahl worked tirelessly for weeks with a campaign called "Helping Our Heroes" that would benefit Detroit EMS and Fire. The Metro Detroit viewers responded to the on air phone telethon on the evening newscast, earning over \$11,000 dollars.

With the help of co-founder Kay Poncill of the Suite Dreams Project, who organized the donations, they were able to go shopping at Gardner -White, who matched the amount raised . On several occasions, POAM representatives went to deliver furniture with WXYZ, while Gardner-White provided delivery trucks with staff. The men and women of Detroit EMS are forever grateful to all who opened their hearts and generously supported this drive. THANK YOU!

"I think that's what really makes us different and really gives me so much hope for metro Detroit, it is a community and we really do come together when things get tough and that is pretty special..."

-Rachel Tronstein,

President, Gardner-White



Suite Dreams Project, Gardner - White and POAM

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Paramedic Mark Astalos receiving the Detroit EMS Medal of Valor

EMS Medal of Valor

The Detroit EMS recipient of the Medal of Valor for 2014 is AEMT Mark Astalos. He is a 12 year veteran of Detroit with 8 years as a Riverview Firefighter. He responded with his partner and Romeo 32 to a 17 day old infant in cardiac arrest. He led the team of EMS responders in resuscitative efforts of the infant. With IO, IV, EKG, intubation and medications, the team experienced a ROSC upon arrival at the emergency department. Thank you for your strong work and congratulations Paramedic Astalos.

Detroit EMS Technicians booted from Hazmat

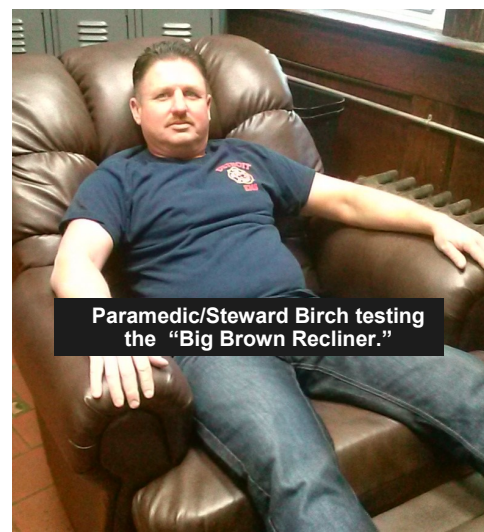
Five Detroit EMS technicians were booted from the Hazmat training at the Detroit Fire Department Regional Training Center. The reason? This was an IAFF sponsored class and the DFFA complained that medics were taking up firefighter spots. The department capitulated and booted the medics out after lunch of the first day. This was a shameful event that the Detroit Fire Department Commissioners and the executive branch of City government allowed to happen. So much for restructuring as equals.

Detroit EMS Technician Takes a \$25,000 Pay Cut

While the Detroit Fire Department is paying for fire to receive MFR/EMT training as the department works towards a so-called integration, the first test case for a DEMS medic going over to fire as a lateral move was unsuccessful. The 20 year veteran had to quit EMS and start in the academy at an entry level wage. City of Detroit government could not complete the process for a lateral move of one individual. This individual took a \$25,000 pay cut within his own fire department. It is interesting that fire will not take a pay cut for performing EMS work. We will continue to press the city for EMS to be treated as equals within the Detroit Fire Department.

EMS CHIEF MIA

Detroit EMS Chief Angela Turner went MIA over the Halloween weekend. It was later revealed that she had retired/separated from the service. We wish her well. As for DEMS, this is the third chief for 2014. The preliminary report from management has former Chief Larkins as the acting chief until a suitable replacement can be found. EMS answers to the Fire Commissioners and someone should be taking a look at that group. There is a problem when you go through three chiefs in less than a year.



Paramedic/Steward Birch testing the "Big Brown Recliner."

Green Belt Lean Processing:

Detroit EMS would like to welcome Amy Cowher and Gary Cone to Detroit EMS. Amy is in the Mayor's office as the Lean Processing Manager. Gary donated the services of his company to the City of Detroit so management across the city could obtain key training on improving efficiencies.

Lean Processing and Six Sigma has been used in the auto industry as well as the medical industry for some time. Individuals from multiple city departments and disciplines have been selected to receive this training. With this training, teams have been assigned a project. Amy heads a team comprised of 2nd Deputy Commissioner Zack, Chief McCracken, Dispatch Supervisor Wyatt and POAM Representative Barney. The team's project is to decrease EMS response times to Code 1 runs.

Amy has been a third rider in the field observing our work and the processes involved in an attempt to eliminate/streamline those practices that are not value added.

The team is working hard on a plan to implement to improve Detroit EMS. The management of EMS and the Fire Department failed to deliver a plan. We look forward to working with Amy and Gary on improving EMS.



Detroit EMS AEV Type I

NEW EMS UNITS

We welcome the delivery of 5 new AEV Type 1 EMS units. The units were delivered with a few issues that needed to be addressed. The module side compartment had an issue with interference and the main oxygen tank could not be removed. The department also had MDC mounts placed in the passenger side leg area, which was a safety issue. The new units have the Stryker Power-Load system in the unit. The stretchers have difficulty fitting in the unit, with interference on the airway/jump seat. The portable oxygen rack was moved from the entry way to the module bulk head. The department deployed the units without training for the medics or the mechanics. The lack of training proved to be a problem as medics did not know how to work the anti-theft and killed the trucks. The shop came to tow the units and damaged the front end and transmission lines. The vehicles have a much better ride than the big Medium Duty units and the Stryker Power Load is wonderful. We look forward to the delivery of the next 10 units as the department has addressed the deficiencies and design issues with the manufacturer.

JOHN T. BARR, BUSINESS AGENT

For those members who have been here for an amount of time, we have always been treated as stepchildren of the Fire Department. The current administration stated that that would no longer be acceptable. For a while I think they tried. After all, many of the administrators acknowledge that 85% to 90% of all the work done by the DFD is by the Emergency Medical Services Division.

Unfortunately, we are right back to being the stepchildren of the DFD. When we first attended the restructuring meetings eighteen months ago we identified many problems. We not only identified the problems, we had solutions for them. While there is a litany of problems, let's just point out two at this time.

One of the first was the communications system i.e. incomplete data on dispatches, sending members from one side of the city to the other, inaccurate dispatches, the inability of call takers to sort out real medical problems from much less severe medical problems (this situation was largely due to lack of training for call takers) etc. This problem was presented to the restructuring firm Conway Mackenzie. Sixteen months later and millions of dollars to the Conway Mackenzie firm, it is NOW a priority.

Another problem was the hiring of Paramedics to be Emergency Medical Technicians. If a Paramedic was hired, why did he/she start as a technician? The Conway Mackenzie representative stated that was a Human Resources situation. Really? With an Emergency Manager in charge that change could be effectuated at any time. Obviously nobody wondered or even cared as to why there was such a dramatic turnover in lower seniority members.

Very fortunately we have a POAM designated representative with the help of the stewards and membership keeping the administration aware of our member's rights. Once in my past life as a steward and writer of Tuebor (DPOA paper) I had a commander ask why I wrote the things I did in my article. My response was simple, "why do you do these things that you do?" That response to the current DFD administration speaks for itself.



STRYKER DELIVERY

Detroit EMS took delivery of Stryker power load stretchers for all of their EMS units. The early reports coming from the crews in the street are positive. The department is placing the power load system on all of the new (15) Ford Type 1 EMS units. Having worked with the new system, I can only ask, why did it take so long for a power load system to be developed. This system will surely extend the careers of many technicians. We would like to thank everyone who played a role in the acquisition of this equipment. A special thank you to Mary Martin who helped make this all happen.

JOSEPH BARNEY, DEMS REPRESENTATIVE

2014 has been quite a year for Detroit EMS. The service and the City of Detroit have been in flux for some time. Detroit was taken over by an Emergency Manager while under the leadership of former Mayor Bing. Everyone acknowledged the need to restructure and start over again as the preceding 40 years represented failure on behalf of the Fire Department.

The City of Detroit elected a new Mayor in Michael Duggan. After the inauguration, the Mayor was given control of the Fire Department. This journey began in early February with a leadership change at the position of EMS Chief. Chief Larkins was well received by the rank and file, but did not get the necessary support from the Fire Administration to be successful. The department could not move forward and the same problems that have plagued EMS continued. With the demotion of Chief Larkins, it was now Angela Turner's turn to be the Chief of Detroit EMS. Her tenure can only be described as adversarial and brief.

The revolving door and the failures of EMS can be traced directly to the management and administration of the Detroit Fire Department. The DFD message of we will be a department of one and equals was far from the truth. After one year of restructuring with multiple restructuring firms and millions of dollars in fees, we are nowhere close to having a workable plan. The Commissioners' preoccupation of trying to get fire online for first responder has degraded the service by taking away the necessary time and resources.

The cost of public safety constitutes a majority share of city budgets. With a city that is insolvent and bankrupt, why does the department remain entrenched in old service and old cost structures? It is important to separate the iconography of shiny red trucks (look at the new DEMS units) and Dalmatians from the reality of today's firefighting. While the fire service experienced a decline in the mid 70's, EMS work increased and fire departments looked to broaden their service model with an "all hazards" approach to emergency services. The main focus is to increase fire department business, prevent station closures and retain jobs. NOT to fix your EMS issues.

The vast majority of runs in the Detroit Fire Department ARE NOT fire related. Does it make sense to respond to all emergencies with a fire model? We are using the excess capacity of fire and a 100 year old response model designed to fight fires to respond to medical emergencies. Using this excess capacity (this overcapacity is a natural result of developing staffing requirements based on response times rather than fire risk) cannot and will not fix your EMS problem of having too few units and personnel. Having mobile light response units and a full compliment of transporting EMS units is the most critical component for the delivery of service. The department must "right size" the firefighting division by shedding the excess capacity of fire and transitioning that budget over to EMS.

There is not a true plan in place with true benchmarks for the integration of EMS and fire. The cost to educate your medically challenged fire division is unsustainable. The failure to accept EMS as equals with fair opportunities and cross training will not bode well for EMS. Save yourself considerable budget dollars and let attrition gut your excess capacity at fire so you can invest in your EMS division. We have a piece of the money pie and fire (big drain on budget) wants a piece now because they cannot justify their existence with this 100 year old response model.

To fix EMS in a timely fashion, you increase the wages (EMS paid more than firefighters), improve the efficiency of H.R., improve the academy, develop a good FTO program. AND most importantly, let EMS run itself. It is pretty obvious that 40 years of the EMS division being lorded over by the Fire Commissioners has been an absolute failure. They have time and time again proved they will not do what is good for EMS or the citizens. They will do what is best for the firemen. This integration is built on a faulty premise; that the excess capacity in fire response operations can be leveraged into EMS at a low cost. With this, EMS services will degrade the fire response services while driving up the cost to deliver EMS services and not fix your EMS problem. Fix EMS before undertaking an integration that you have not properly planned. We CAN end up back in bankruptcy.

ASSAULTS UPON EMS

MEDIC 6

On October 19, 2014 EMS Medic 6 responded to a call for a possible pedestrian accident on Woodward in front of the Fillmore. The crew was verbally attacked by a large crowd and 3 individuals allegedly attacked and fought with the medics. The crew was reported to be ok and the suspects were taken into custody.

MEDIC 16

On November 5, 2014 a patient attempted to jump out of the patient module of a unit traveling on the freeway. The medic was able to grab the patient as he was jumping out of the unit. The medic and the patient were both hanging out the rear of the ambulance. The medic was able to get the patient into the back of the EMS unit where the patient began beating him. The medic and the patient fought until they were able to stop. The medic sustained a number of facial injuries and was treated at a local hospital. We commend our brother for the selfless act of courage he displayed in saving this man's life.

Contact Us

Give us a call for more information about our services and representation

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From the Academy to the streets-Academy #61 is in service