

Correspondence

PREMIER ISSUE

As the founding President of the National EMS Management Association (NEMSMA), I was very excited to see the premier edition of the *EMS Management Journal*. One of NEMSMA's visions is to create opportunities for sharing experiences related to improving care and services provided to the sick and injured. I think the *EMS Management Journal* is a major step in realizing this vision.

Mic Gunderson and the editorial staff at HealthAnalytics have done a superb job in preparing this first edition of the *Journal*. This premier issue set the bar high by providing a EMS Six Sigma improvement case study, a review of the current state of EMS deployment models and a reprint of a historical article on benchmarking by Jack Stout. Wow, what a line up.

Finally, NEMSMA was proud to include our first position paper on the Scope and Philosophy of Quality and Performance Management in EMS. We hope this position paper sets the stage for further position papers and generates discussion related to improving all of what we do in EMS.

I hope that you enjoyed the premier issue of the *EMS Management Journal* and again, thanks to HealthAnalytics and the NEMSMA Board for making this a reality.

Todd Hatley, MBA, MHA, REMT-P, CQM
Immediate Past President, NEMSMA;
Assistant Professor,
PreMIS Clinical Research Associate Director;
Department of Emergency Medicine,
University of North Carolina – Chapel Hill

...on the premiere issue of *EMS Management Journal*. It is excellent, and with some very timely and 'right on point' topics.

I was glad to see the reprint of Stout's articles, too! I found one of them from my archives a few weeks ago and you have saved me from opening about 5 more boxes in my basement to find the other one. Thanks!

I think its very good timing for a more scholarly management journal. It has been over ten years since I published my masters thesis results in *Prehospital & Disaster Medicine* way back in 1990 or 1991 when I was Vice President at EmeryCare in Erie — back when *Prehospital & Disaster Medicine* was the only scholarly journal for EMS.

I think the *Journal* will take off and gain significant altitude very quickly! Hats off to all who played a part in putting it together...

Stephen R. Wirth, Esq.
Page, Wolfberg & Wirth, LLC

The opportunity presented by a peer-reviewed journal dealing with EMS management issues is a great one. Time will tell if we make the most of it. Our profession is coming of age and there is enough collective experience and academic interest to raise our management practice to a new more factual and outcomes based level.

I have been involved in EMS management for two decades. My experience is rich and varied but it is only my experience. There are many of us like this and we have shared our experience over the years and often found great utility out of other systems experience. But, this kind of

sharing of wisdom does not have a foundation in sound evaluation and the scientific method. Add to this the often voiced "my system is unique" mantra, and we will hit a wall in advancing EMS in the interests of the people we are dedicated to serve.

The opportunity here is for a new level of professional management practice to develop through the work of the authors in the *Journal*. It is up to all of us to contribute to the process so the work remains relevant and challenging.

Kurt Krumperman
Regional President
Rural / Metro Corporation
Scottsdale, AZ

BENCHMARKING

Congratulations to HealthAnalytics and the editorial staff of *EMSMJ* on the publication of your first issue. Your accomplishment is groundbreaking as many EMS professionals saw a peer-reviewed EMS management journal as a vision but not a reality. It is my fervent hope that *EMSMJ* will become a source for seminal works in EMS leadership and management.

After reading the *Journal* I am compelled to comment on the article "Capture the Competitive Edge: How Benchmarking Can Improve Your Ambulance Service," written in 1997 and published in another journal (*JEMS*). The first issue concerns the logic employed in selecting this article. The article lacks proper citation, statements that are unscientific and show the author's bias toward commercial EMS. "Jack Stout, a renowned authority on EMS systems, probably wrote this article from the aft deck of his sailboat" (p. 73). Is it in the *Journal's* best interest to declare someone an "authority" and to publish that individuals work based on his "expertise."

Copi (1978) identified these types of actions as the logical fallacies of both Argumentum ad Verecundiam (appeal to authority) and Argumentum ad Populum (appeal to the people). Appeal to authority is generally thought of as an expert being granted carte blanche authority in areas outside her committed field. Someone may be recognized by many as an authority on EMS systems. Publishing that individual's work in a refereed journal is in violation of the core concepts of peer review and reduces the work to a testimonial. It asks the professional reader to accept a possible fallacy as the literal truth. Appeal to the people occurs when an entity attempts to win over the masses by "arousing the emotions enthusiasms of the multitude, rather than by appeal to the relevant facts" (p. 93). Again, for a professional journal to publish an article without proper citation is a de facto Argumentum ad Populum.

The publication of this 'Reflection' is also curious as the article cannot be described as either seminal or as standing the test of time. Benchmarking has been used successfully to identify both successes and failures in many professional industries. It is not without it's own faults or detractors. Witzel (1998) noted that a serious criticism of benchmarking is that it leads to convergence and groupthink. Benchmarking can lead to imitation instead of innovation. The outcome focuses on best current practices not best possible practices.

Benchmarking is not a simple set of measurements that can be used to generalize performance. Griffith and White (2002) cautioned that "even relatively simple measures require substantial work" (p. 181). Some of these complexities include definition, validity, reliability and adjustment. Stout (1997) attempted to identify these issues as lateral benchmarks, but fell short of identifying how these were sources of truth.

Human resources professionals have been especially critical of benchmarking, maintaining that benchmarking fails to "measure, assess, and predict the outcomes of workforce tactics in the same way they do with other parts of business" (Kutik, 2003, p. 74). Another major area of concern is the inside-outside balance needed to assess human resource issues. The most important, specific issue is the failure to account for context. In example, comparing human resource benchmarks between manufacturing and service organizations can mislead human resource profession-

als as to the balance between internal and external information (pp. 75-76). Another major issue is a failure of benchmarking to identify the magnitude of a critical human resource incident. These data are needed to measure actual causes of employee behavior (p. 76). There is obviously more to benchmarking than presented here. These are simply a few examples of the dangers of ‘reflecting’ on the wrong sources.

This response is not an attack on the author or the subject of benchmarking. The main purpose is to help *EMSMJ* to gain its place in the professional EMS literature. Many of the articles in this premier edition are well-written and scientifically sound. Congratulations to all of the authors and to HealthAnalytics on a great first issue.

Harold C. Cohen, Ph.D., CHE, EMT-P
Division Chief
Baltimore County Fire Department

- Copi, I. M. (1978). Introduction to logic [5th ed.]. New York: MacMillan Publishing Company, Inc.
Griffith, J. R. (2002). The well-managed healthcare organization. [5th ed.]. Chicago: Health Administration Press.
Kutik, W. M. (2003). Strategies: Benching benchmarks. *Human Resources Executive*, 17(12), 74-76.
Witzel, M. (2001). Financial times. [Link to source]

Editor Response:

I’d like to thank Dr. Cohen for his kind remarks on the *Journal* and thoughtful comments on the reprinted article by Stout.

“Jack Stout, a renowned authority on EMS systems, probably wrote this article from the aft deck of his sailboat” was in the original version of the article. For the sake of accuracy and completeness, it was included in our reprinting.

The potential pitfalls of benchmarking as pointed out by Dr. Cohen are well taken. I think it points to the differentiation that many quality management professionals in mainstream industry make between benchmarking and comparative analysis. As its name implies, comparative analysis is a comparison of performance statistics. Done well, the comparisons should be between groups that have appropriate similarities so as to make such comparisons meaningful — while recognizing no two groups are absolutely identical. One of the main goals of comparative analysis is to identify potential best practices among participating groups for the purpose of benchmarking.

Benchmarking, in this context, is a careful search for ideas in one group’s processes that can be incorporated into the processes of another group. When one reviews the processes of another group, the differences of definition, validity and reliability must be considered and adjustments made as appropriate — as pointed by Dr. Cohen. This would seem to be the same issue of ‘context’ that Dr. Cohen cites as a concern about benchmarking in the human resource community.

In closing, I must say that I’m delighted to be having this caliber of dialogue on EMS performance issues. It’s long overdue. Thank you so much for your letter Dr. Cohen.

Mic Gunderson
Editor

*Please send any correspondence section submissions to Mic Gunderson at
mic.gunderson@healthanalytics.net*