INCREASING PARAMEDIC RETENTION IN THE EAST HARTFORD FIRE DEPARTMENT

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CERTIFICATION STATEMENT

I hereby certify that 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 writing of another.

Signed: ____________________________________________
Abstract

The problem is that firefighter/paramedics in the East Hartford Fire Department (EHFD) do not choose to continue serving as paramedics. This results in an increased workload for currently serving firefighter/paramedics as well as an increase cost to the town due to rising overtime. The purpose of this research is to identify strategies which can help retain sufficient numbers of firefighter/paramedics and provide an adequate level of service for the EHFD. This descriptive research project was designed to answer the following questions: a) Why do East Hartford firefighter/paramedics resign or retain their paramedic status?, b) What are the characteristics of employment for firefighter/paramedic in organizations that have high, medium, or low retention rates?, c) Are there characteristics that differentiate firefighter/paramedics that retain certification from those who do not?, and d) What human resource management strategies are employed by other organizations for retention of firefighter/paramedics? A literature review was conducted prior to the start of this project. The procedures used to carry out the research included questionnaires and a personal interview. While a variety of paramedic retention strategies exist, the results of this research showed that compensation and work distribution were the leading factors that affected paramedic retention. Following this research, recommendations included the creation of an employee retention program, re-evaluation of the compensation package currently offered to the firefighter/paramedics, and evaluation of the Emergency Medical Service (EMS) delivery system of the East Hartford Fire Department. It was further recommended to recruit internal candidates to send to paramedic school and explore the possibility of allowing officers to function as paramedics.
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Introduction

The population in the United States is aging (U.S. Census, 2005). The Baby Boomers that were born after World War II are the senior citizens of today. Never has there been a greater need for paramedics as there is today while the current trend of rising 911 calls for medical assistance will only continue. As the Baby Boomers continue to age, the demand for EMS will also grow.

It is not surprising that the 911 call volume in the Town of East Hartford is steadily raising. In the past 25 years, the call volume has almost tripled (East Hartford Fire Department, 2008). Of these calls, EMS assistance is the predominant reason why people call 911. In recognition of this problem, the East Hartford Fire Department is currently examining ways to address the growing demand for paramedics.

The pre-hospital services offered by paramedics are not the only medical areas dealing with retention strategies. The need for nurses and physicians is at a critical point. Medical service administrators are looking for innovative solutions to help solve the problem of retention of their personnel. The cost associated with poor retention of personnel may be staggering. (Jackson, 2004)

The problem with the Firefighter/Paramedics in the East Hartford Fire Department is that they do not choose to continue serving as paramedics, resulting in an increased workload for currently serving Firefighter/Paramedics, loss of experienced firefighter/paramedics and increased cost to the town due to rising overtime. The purpose of this research is to identify strategies which can help retain sufficient numbers of Firefighters/Paramedics and provide an adequate level of service for the East Hartford Fire Department. This research will use the descriptive method and
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will rely on questionnaires, personal interview, document review and data analysis. It will help answer the following questions: a) Why do East Hartford Firefighter/Paramedics resign or retain their paid medic status?, b) What are the characteristics of employment for firefighter/paramedic in organizations that have high, medium, or low retention rates?, c) Are there characteristics that differentiate firefighter/paramedics that retain certification from those who do not?, and d) What human resource management strategies are employed by other organizations for retention of paramedics?

The results of this research will be of great value to the East Hartford Fire Department as it implements new strategies to help with paramedic retention and can be useful to other fire departments during their strategic planning process and implementation of human resource strategies.

Background and Significance

The Town of East Hartford is located in the North Central Region of Connecticut. It has an evening population of approximately 50,000 and a daytime residential and transient population of approximately 70,000 (Connecticut Emergency Resource Center, 2009). East Hartford is separated from the capital city of Hartford by the Connecticut River and it is part of the Capital Region that has an ethnically diverse population of approximately 1.2 million.

East Hartford was incorporated in 1783 with mainly an agrarian based economy. The present economy is based primarily on aeronautical technology and industry. The town was enjoying a high rate of growth in commercial and residential construction until the recent down turn in the economy. The town government operates with a strong mayoral form of government and a town council that has historically supported public safety agencies (The CT Fire Museum 2006).
The East Hartford Fire Department was organized in 1889 and began with three fire stations and 120 volunteers. The fire department completed the transition to an all paid career force in 1940 (The CT Fire Museum 2006). The department paramedic program started in 1975 with one intercept vehicle staff by two firefighter/paramedics. In 1975, the department responded to approximately 2500 calls which included fire rescue and EMS and was staffed at 31 personnel per shift.

Today, the fire department is comprised of 130 career firefighter and six civilian support personnel. The department operates from five fire stations and an apparatus maintenance shop. The East Hartford Fire Department deploys five paramedic engine companies, two ladder companies, one rescue company and a shift commander vehicle. The department staffs a Fire Alarm Division, Medical Division, Training Division, Apparatus Repair Division, Office of Emergency Management, Information Technology and a Fire Marshal Division. The line personnel are staffed at 29 per shift with a minimum staffing of 26 per shift. There are four shifts that staff 24/7, 365 days a year.

Regionally, the department responds to surrounding communities on mutual aid including the city of Hartford and the town of Manchester and also participates in the State Wide Fire Plan, the Capital Region Hazardous Materials Response Team and the Connecticut Urban Search and Rescue Team.

Currently, the East Hartford Fire Department responds to approximately 9,700 calls per year. Of those calls, approximately 7,500 are medical calls and of those 75% are dispatched as Advanced Life Support (ALS) and 25% Basic Life Support (BLS). The Medical response is
tiered with a private ambulance company who provides transport. The shift is always staffed with at least 5 firefighter/paramedics who are assigned to the five engine companies.

Presently, when paramedic engines are dispatched to calls, the paramedic evaluates the patient and determines if the patient requires ALS. If so, the paramedic transports to the hospital with the private ambulance company. If it is determined to be BLS, patient care is transferred to the private ambulance company and the paramedic becomes available for another call. When an East Hartford Fire Department firefighter/paramedic evaluates or transports with a patient, the patient is billed for services provided. The leadership elected to bill for EMS services in 2007, in which funds collected are returned to the general fund to offset the tax base.

In the three years following 1993, the department hired 53 firefighter/paramedics. At that time, the department was responding to approximately 5,800 calls total. Of those calls, 70% were medical calls. The paramedics responded from one ALS intercept vehicle and were able to respond to about 50% of the ALS dispatched calls. At that time, there were 67 functioning firefighter/paramedics in the department providing ALS service.

Today, the department deploys five paramedic engines and has 30 firefighter/paramedics providing ALS service to approximately 7,400 medical calls. These firefighter/paramedics are handling a large amount of the work that the department performs. The “burnout rate” is becoming evident as firefighter/paramedics are voluntarily reverting back to a firefighter/Emergency Medical Technician (EMT) position.

The present contract between the town and the firefighter’s union allows a firefighter/paramedic to revert to a firefighter/EMT after 10 years of service of ALS service. While providing ALS service, the firefighter/paramedic is given a yearly stipend of ½% of the
top step firefighter pay for every year of paramedic service provided to the town. The stipend is maxed out at 30 years of service which gives the firefighter/paramedic 15% of top step firefighter pay. The department also pays for the Continuing Medical Education (CME) classes required to maintain licensure and pays overtime for attendance to those classes. Firefighter/paramedics are also offered more overtime opportunities and also have opportunities to work overtime at special events within the town. Even with these extra financial benefits, firefighter/paramedics are reclassifying to firefighter/EMT at an alarming rate.

The future impact on the East Hartford Fire Department may be costly due to rising paramedic overtime. More importantly, is the ability to provide high quality ALS to our residents. With the number of firefighter/paramedics decreasing, the burnout rate due to increased workload will possibly affect patient care and firefighter safety. The continued loss of senior firefighter/paramedics may also affect patient care specifically because pre-hospital care is heavily dependent on experience.

This research is important to the East Hartford Fire Department as the fire department tries to stop the current trend of firefighter/paramedics reclassifying to firefighter/EMT. Identifying possible strategies to improve retention of firefighter/paramedics is paramount because of the growing elderly population of East Hartford residents. Current census has the 50 and over population at 35% for the town. As stated previously, this growing elderly population could strain the fire department services to possibly detrimental outcomes. There are two skilled nursing facilities located in East Hartford.

This research is directly related to the National Fire Academy (NFA) Executive Leadership Course. The course underlines the importance of providing adaptive leadership to manage
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change (NFA, 2005). This research directly relates to the implementation of organizational change to improve paramedic retention thereby exercising good leadership skills.

The issue this research examines is also directly related to the United States Fire Administration (USFA) five year operation objective of appropriately responding in a timely manner to emerging EMS issues (NFA, 2008) by utilizing new human resource strategies and enhancement of firefighter/paramedic workforce management and deployment.

The goal of this research is to look at the many aspects of paramedic utilization and retention in the fire service and other disciplines. The research will examine the existing body of literature on the subject in preparation for the new research to help identify possible strategies for dealing with paramedic retention.

Literature Review

Literature review was conducted to analyze the existing body of knowledge regarding paramedic retention in the fire service. The review consisted of a fire text book, Executive Fire Officer Papers, fire service/EMS trade magazines and journals, non-fire related texts journals, and electronic publications. Overall, there are a limited number of resources available on this subject.

The author found a large amount of resources on employee retention or specifically paramedic retention, but very little on the exact problem that the EHFD has regarding retention within a certain job classification. It is important to note, the EHFD does not have an employee retention issue. Over the past 17 years, the EHFD has lost only six members due to leaving for other employment.
The East Hartford Fire Department is not alone when dealing with paramedic retention. Phoenix Fire Department addressed the issue by initiating the internal recruitment of firefighter/EMTs who wanted to become paramedics. In 2004, they had two paramedic classes with 20 students each. This helped increase the number of paramedics. Conversely, Miami-Dade Fire Rescue addressed the problem by making all transport units ALS to include an officer as the third person support during fires. The successful commonality of both departments reportedly included large increase in pay for paramedics, bid systems, increased paramedic staffing to reduce burnout effect and had a strong, progressive union (Colin Flanigan, Fairfax County Fire and Rescue). The Sacramento Fire Department published their findings “Agency in Crisis,” in regard to recruitment and retention of their firefighter/paramedics. The unequal distribution of work caused many firefighter/paramedics to show signs of excessive work-related stress. Most of the firefighter/paramedics were suffering burnout after only two or three years. The solution to the problem in this case was that the fire department corrected its own paramedic training program to increase the number of paramedics by 40 percent. The department also committed to four-person staffing on fire companies and at least two paramedics for ambulances to share the work load (Sacramento Fire Dept, 2006).

Assistant Chief Daniel Deihl from the Kalispell, Montana Fire Department also found the problem of paramedic retention existed in the Kalispell Fire Department. His research concluded that the fire service should concentrate on providing training for managers and employees to understand and identify how to reduce turnover and develop programs to prevent the future loss of firefighter/paramedics. Chief Diehl went on to state that relationships between firefighter/paramedics and administration should be worked on and fostered and exposure to EMS work should be reduced by rotating personnel to different apparatus (Diehl, 2006).
The literature review showed that anytime employee retention was an issue, job satisfaction was directly related. Chief Thomas Griffith of the Partego Texas Fire Department talks about employee retention and the balancing act of satisfying employees. Chief Griffith initiated a survey on employee retention and job satisfaction. The results showed that salaries and promotional opportunities were necessary to have happy and satisfied employees. These factors seem to top the list almost equally. Benefits and the need to feel that they are making a difference in the organization were also important. Chief Griffith also concluded that the low call volume and poor leadership contributed topped to employee dissatisfaction. (Griffith, 2006).

Job satisfaction was the topic of a survey conducted by firefighter/paramedic Dominic Swinhart of the Aberdeen, WA Fire Department. The survey outlined ongoing barriers to paramedic retention. Some of the results of his survey were geared toward paramedic job satisfaction. The report highlights that the paramedic needs to feel part of the organization and be treated fairly with respect from the leaders and peers. Some of the survey responders stated that they were being harassed because they were paramedics. Others responded that their administration made it clear to them that EMS was in the fire service to generate revenue. Some paramedics were harassed by their fellow firefighters simply because they were enthusiastic about EMS. Swinhart concludes by stating that a fire department should be progressive when dealing with EMS. He asked whether other department’s firefighter/paramedics are equally respected as the firefighters and questions whether fire departments are placing their focus on the issue. He states, “If your focus is still fire suppression when 80% or more of your calls are medical, your department is not well integrated with EMS.” (Swinhart, 2008).

There may be other factors which contribute to poor retention. Lack of advancement opportunities and work shift scheduling may also have a detrimental effect on job satisfaction.
and retention because of a disproportionate work load. David Drew from East Fork Fire and Paramedic Districts found that having a clear mission and vision for the organization would help with job satisfaction. His research noted that pay and benefits need to be competitive with other fire departments and/or EMS agencies. (Drew, 2001).

The Newport Beach Fire Department is also having problems retaining firefighter/paramedics. As in the EHFD, the trend is that veteran firefighter/paramedics willingly give up being a paramedic with the department and revert to firefighter/EMT at a lower salary scale. Matheis goes on to state they got so low on paramedics that the number of forced overtime shifts for firefighter/paramedic was increasing to unsafe levels. During his research on the topic of firefighter/paramedic retention, Matheis has found that the key issues were job satisfaction, productivity, and empowerment. His research conclusion again leads to leadership, training in the use of transformational behavior between supervisor and subordinate member. Training also included retention strategies for supervisors and establishing a career tract for employees who are serving as firefighter/paramedic (Matheis, 2008).

Other departments are taking even more aggressive steps to combat firefighter/paramedic retention. St. Petersburg Fire and Rescue was experiencing a 33% attrition rate of firefighter/paramedics from 1996 to 2007. Their firefighter/paramedics were willing to voluntarily reclassify themselves to firefighters who earn 18% less. Again, job satisfaction was the main topic of discussion. During their research, they found that job satisfaction had a direct relationship to firefighter/paramedic retention. Their recommendation was to create a strategic planning task force to look at these issues. They also recommended to only hiring firefighter/paramedics for the future. (Knight, 2008)
A strategic planning process was conducted by the East Hartford Fire Department in 2007. The process took approximately 18 months and included internal and external stake holders throughout the process. Through internal questionnaires, the largest push from department members was to transition to ALS transport units. These units would transport and also support fire suppression units. To this day, this has not come to fruition (EHFD, 2007).

As the department continues to lose firefighter/paramedics due to reclassification to firefighter/EMT or firefighter, the medical division initiated a questionnaire to the firefighter/paramedics of the department. When they were asked to give suggestions to improve the EMS delivery system, the ability to not transport with the patient to the hospital topped the list. There also was a great deal of dissatisfaction with the emergency medical dispatch. A majority of the firefighter/paramedics felt that they were doing a disproportionate amount of work because the Emergency Medical Dispatch (EMD) protocols classified most of the medical calls as an ALS call. An increase of salary was only mentioned a few times (see Appendix A).

Retention as a whole is not strictly a fire service issue. All organizations are dealing with retention related issues. During a interview with Ken Vancara, General Manager of Ingenix, he suggested that regardless of what type of organization it is, strategies used in this company can be used anywhere regardless of the type of organization. Vancara oversees over 1300 personnel. His most effective strategy pertains to equal distribution of work. His advice to the author was to think out of the box and find innovative ways of relieving work load for the firefighter/paramedic. He also suggested that the firefighter/paramedics should have direct input into the solutions of firefighter/paramedic retention. If they do most of the work then they should be given preference in some matter for promotion. The extra work load must be rewarded, if not,
he questioned the incentive and motivation. Salary is important but self actualization may be just as equally important (see Appendix B).

Lauri Beechler from Loyola University Medical Center suggests that a large number of EMT students attend paramedic school to be more marketable for entry into the fire service. On a study done on paramedic students, many had no interest to become or stay as paramedics but did so only to get on to the fire department. This seems to be the growing trend in the pre-hospital field. Departments must identify these people and weed them out during the hiring process (Beechler, 2010).

The literature review showed that employee retention is a serious problem throughout the health care field as job hopping in the healthcare industry is rampant. The nursing shortage has also affected the paramedic community as it is now believed there is a paramedic shortage nationwide and there seems to be no relief in the near future. Paramedics are now doing jobs in the hospital that were previously done by nurses. The modern workforce is aging while many people are retiring and the number of younger people poised to take their place is dwindling as the health care field becomes less appealing to new generations. This is no different in the fire service. One solution to this problem is to push the culture of retention on the people at the top of the organization (Jackson, 2004).

Many employees today want more than a big salary. Fire departments need to recognize that employee expectations may include personal and professional growth. Employees want to be part of the solution and feel empowered. They want to be directly involved to include knowing what is happening in the department and to have input in the system and their future (Withers, 2002).
Retention of firefighter/paramedics should begin from day one with new hires. Hospitals have found that health care workers begin thinking about leaving after about 180 days. Therefore, retention must be integrated into the culture of the organization (Powers, 2007). Powers also found that inadequate staffing levels are the number one reason for job dissatisfaction in the health care profession. This carries on to the pre-hospital field in which paramedics are over worked, under paid, or under appreciated.

Finally, examining the role of the paramedic in the nation’s Emergency Medical Services has grown exponentially since the first curriculum (IOM, 2007). Several revisions have occurred and the paramedic’s scope of duties has expanded (NHTSA, 2004). With the added responsibility, continuing education requirements and high stress levels, the paramedic job is becoming less attractive in today’s fire service.

The literature review had a great impact in supporting and influencing the purpose of this applied research paper. The research illustrated the current problems with paramedic retention in the fire service and the consequence of poor retention. Effective paramedic retention programs in the fire service is an ongoing concern and a dilemma that will only get worse in the future if great strides aren’t made to improve job satisfaction in the area of firefighter/paramedic employment.

Procedures

The research methodology utilized for this project is the descriptive research method. The desired outcome of the research would be to identify alternative strategies to improve firefighter/paramedic retention. By identifying alternative strategies, the EHFD can help improve firefighter/paramedic retention and be able to provide a safe and adequate level of service. These
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procedures will try to answer four research questions regarding EHFD paramedic retention, job characteristics for firefighter/paramedics of other fire departments, and human resource strategies.

After an extensive literature review, the author developed two questionnaires for East Hartford Fire Department firefighter/paramedic and for other fire departments that provide ALS care throughout the country. The questionnaires included questions on demographic information, firefighter/paramedic retention rates, retention strategies and benefits. The internal questionnaire can be found in Appendix C, the external in Appendix D. Cover letters were created to explain the rationale behind the questionnaires and a hyperlink was added to each to connect the participant directly to the questionnaire (Appendices E and F). The questionnaires were created on a web-based service called “Survey Monkey” which can be found at http://www.surveymonkey.com. After completion on February 5, the cover letter containing the link was sent via email with a February 19 return deadline. Based on the authors own experience, the deadline was chosen because the majority of questionnaires on surveys are typically answered during the first 10 days of the request. Prolonging the deadline would also add no benefit to the research. The questionnaire was sent electronically to each of the 203 fire departments and fire districts within the state of Connecticut via the Connecticut Fire Academy list service (CFA, 2009). The questionnaire was also sent to other fire departments across the country using an email list of 632 Executive Fire Officer Program students and graduates provided by the National Fire Academy. The national questionnaire was also posted on the National Society of Executive Fire Officers (NSEFU) website. During this research, the author felt-it would be appropriate to send questionnaires to fire departments without regard to demographics. Information gathered from any fire department regardless of the specific fire
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department or community demographics can be useful as procedures, processes, and human resource strategies can be customized to fit most departments.

The internal questionnaire followed the same process as the external questionnaire except the cover letter was changed (Appendix E) and the letter was sent via email to all 67 past or presently functioning paramedics currently employed within the East Hartford Fire Department.

A total of 107 questionnaires were completed and returned for the national questionnaire and 37 for the internal questionnaire. The author was not able to determine how many persons actually received the external questionnaire because of the inability to track responses that were generated from the NSEFO web site. The data from the responses was compiled, reviewed, and analyzed to answer the four research questions.

The author conducted a personal interview with Kenneth Vancara on January 15. Mr. Vancara was chosen because of his corporate experience with employee retention. Mr. Vancara is currently the General Manager for Ingenix Payment Accuracy Solutions and oversees over 1300 employees. Mr. Vancara was asked a series of questions pertaining to employee retention and job satisfaction (Appendix B).

During the course of the research, the author encountered two specific limitations: the questions on the questionnaire assumed individuals were able to understand the intent of the questions, and the individuals would answer the questions in a truthful and honest manner as the questionnaires were done anonymously, and the specific name of the individuals was not asked.

After reviewing the questionnaire once it was sent for completion and given the opportunity, the author would have asked specific follow up questions or phrased some questions differently. Starting with the question of mandatory commitment, the author confused some of the
participants with the term. Some departments either have no mandatory commitment clause or the paramedics always work as paramedics through their career. This question was received as ambiguous and multiple comments or questions from the participant were received on the intent of the question or the definition of the term.

Results

The results were extracted and analyzed from the questionnaire and interview conducted by the author. The general demographic information for the external questionnaire was as follows: a total of 107 questionnaires were completed and returned to the author from 26 different states, 103 respondents completed question 1, fire department contact information.

Question two asked if their fire department provided paramedic level emergency medical services. One hundred and six respondents answered the question. Of those, 81 answered yes which accounted for 77.1% of the responses. Respondents who answered no were sent to exit the question.

Questions 1-11 were used to answer research question two. Sixty six respondents answered question one of the paramedic retention portion of the questionnaire.

The mandatory commitment times to provide ALS for firefighter/paramedic ranged from no commitment at all to the entire length of employment. The mean was 5 years.

Fifty six respondents answered question two on retention beyond mandatory commitment. The percentage in low, medium, or high retention is illustrated below in Figure 1.
When asked if their departments’ paramedics also function as firefighters, 70 responded to the question, a total of 98.6% yes responses.

Of the 173 responses, fire officers may function as paramedics 89% of the time.

In determining what type of EMS service the department provided, the results had a wide range. In those responding, 17.8% of the respondents chose ALS intercept, 58.9% chose ALS transport, and 23.3% chose other. The complete responses can be found in appendix G.

Examining how the EMS service was provided by system design is illustrated below in figure 2. ALS engines top the list with 76.4% of the 72 respondents.
Respondents were questioned regarding the additional benefits provided to paramedics in their department. These responses are summarized in Figure 3 and detailed in Appendix H.
The departments were also asked the reasons that paramedics decided to continue or discontinue classification. The responses are summarized in Figures 4 and 5.

**Figure 4**

**Figure 5**
The results also identified what other characteristics of employment might increase paramedic retention in the respective fire department. Compensation, benefits and promotional opportunities top the list. A summary of results can be found in Appendix I.

Research Question 3

Research question three was looking for reasons why firefighter/paramedics choose to continue to serve or not. Many of the questions used for research question 1 and 2 were designed to assist and answer research question 3. Questions 1, 3, 4, 7, 9, 10 were used to help answer research question 3. Results for these questions were stated previously.

Research Question 4

The personal interview and question 18 was used to answer research question 4. A summary of the human resource strategies can be found in Appendix J. While interviewing Mr. Vancara, the author realized that similar human resource strategies can be used for retention regardless of what type of organization it is. Vancara recommends a fair salary, promotional opportunities and an equal distribution of work as the top priorities for any employee retention. He also recommended an avenue for employees to seek when looking for guidance or resolution to ongoing problems. The complete Vancara interview can be found in appendix B.

Research Question 3

Question 5 of the internal questionnaire was also designed to help answer research question 3 (Appendix K). The advantage for the author was the prior knowledge of which respondents are currently serving, and which ones were not. Having the ability to directly correlate
characteristics to those who have chosen to continue or not was a significant benefit for the research.

The general demographic information for the internal questionnaire was sent to the present and past paramedics of the East Hartford Fire Department. A total of 37 questionnaires were completed and returned to the author. Of the 49 members who received the questionnaire, two members have been out of work on a long term disability.

Question 1 and 2 were designed to ascertain the number of years serving as paramedics with the department and whether they were still serving as a paramedic. The years served was important information to the author because it represented whether or not the respondent had a contractual obligation to continue to serve or is currently serving as a paramedic in the East Hartford Fire Department.

Question 3 and 4 was used to answer research question 1.

The paramedic stipend they receive and increase job satisfaction was tied on top of the list for reasons to continue to serve. Figure 6 represents the summary of responses.
Figure 6

Reasons why East Hartford Fire Department medics have chosen not to continue service as a medic is led by lack of compensation. Figure 7 shows the summary of responses to this question. One additional comment which surfaced a few times under the “other” category was the inability to continue service because of promotion to officer.
Paramedic retention is a significant problem in some departments but is not a problem at all in others. The key to the solution is to find a balance while trying to improve employment retention.

Discussion

Comparing the literature review and results of the research confirms the need for innovative retention strategies to keep the firefighter/paramedic functioning as paramedics. The fire service is not done dealing with paramedic retention. All aspects of pre-hospital care are dealing with the nationwide shortage of paramedics. The healthcare field is feeling the crunch and currently never has there been a greater need for paramedics. This country is at a critical point where the need
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for health care providers is rapidly growing but the supply of paramedics and nurses is diminishing (Jackson, 2004).

The literature review and research both showed that many fire departments are having paramedic retention problems. There are many variables to consider when addressing retention issues: labor contracts, system design, salaries, benefits, workload and department values and cultures. The importance of job satisfaction cannot be understated when looking at paramedic retention. Job satisfaction has been found to be directly related to retention (Griffith, 2006). When looking at the results of the research and reviewing the literature review, job satisfaction seems to be a recurring theme. One major difficulty with job satisfaction is that many factors affect it and sometimes it may be difficult to quantify.

The questionnaire results and the literature review also indicated the number one reason paramedics continue to serve after their commitment is compensation. Drew concluded in his research that pay and benefits are the most important aspects affecting retention. Both the internal and external questionnaire results put compensation as the most important reason why paramedics continue to serve beyond the commitment. In contrast, St. Petersburg Fire and Rescue had paramedic retention problems even though their department gave their paramedics an 18% base increase. That is the largest bonus both the research on literature review revealed. Their recommendation to increase retention was to create a strategic planning task force to look at the issues globally. They also recommended only hiring firefighter/paramedics in the future. (Knight, 2008)

Interesting enough, the research also showed that departments which only hire firefighter/paramedics and mandate personnel to function as medics throughout their careers
have very few retention problems. Of the sixty-six respondents who answered the question on length of paramedic commitment time, twenty departments responded that firefighter/paramedics were required to be paramedics throughout their career. Many of those departments stated that the firefighter/paramedics could be relieved of paramedic duties if they are promoted to the officer rank. All twenty departments who mandated a permanent paramedic commitment stated that they did not have an employee retention problem. Two stated they occasionally lost employees who were hired by other fire departments which paid a higher salary.

Other departments had no commitment at all including nineteen of the sixty-six respondents. Eight of these nineteen stated they had paramedic retention problems and were addressing it in different ways. Three of these departments had a high retention rate, greater than 10 years, after the mandatory commitment was served. All three had different compensation packages for their paramedics but they did have something in common. All three only did ALS intercepts and all three staffed their apparatus identical with paramedics. The engines, ladders, and recues were all ALS and they all allowed their company officers to function as medic if they desired to.

Second only to compensation, the unequal distribution of workload is a large factor for dissatisfaction and poor retention. Typically, most fire departments which provide EMS are dealing with large call volumes of EMS compared to fire related calls. The nationwide average is 70-80% EMS, which typically puts a greater workload on the paramedic (Colin Flanigan, Fairfax County Fire and Rescue). The Phoenix Fire Department addressed this issue by recruiting internal members to attend paramedic school provided by the fire department. In one year, the department trained 40 paramedics. Increasing the amount of paramedics helped relieve some of the workload. The literature review also showed that the Sacramento Fire Department took a similar path by training internal candidates and increasing the total number of paramedics in the
department (Sacramento Fire Department, 2006) The external questionnaire had call volume and unequal distribution of work as the two reasons why people chose not to continue functioning as paramedics. The internal questionnaire had compensation first and unequal distribution of work as second for the discontinuing of paramedic service.

Lack of promotional opportunities was also a key factor in paramedic retention. Vancara believes that the employees who perform most of the work should be rewarded with preferential treatment towards promotion. Employees today not only want big salaries but they also want personal and professional growth (Withers, 2002). The research results support this theory but the respondents on average did not put as much weight on promotional opportunities. The Newport Beach Fire Department, after conducting research on the topic of retention, concluded that establishing a career tract specifically for firefighter/paramedics would help increase retention.

When analyzing the results from the internal questionnaire, paramedics stated they retained their certification because they enjoyed the high call volume and found the extra compensation a relief. A majority of the respondents stated they discontinued their service because of high call volume and the added responsibility of being a paramedic. Some also stated they felt the compensation was not enough for the extra work load. Interesting enough, some of the respondents that have chosen not to continue to serve as a paramedics work part time jobs with private ambulance companies functioning as a paramedic.

As mentioned earlier, probably the most common human resource strategy used to combat retention problems is requiring entry level employees to be paramedics and mandate that they serve as paramedics throughout their career. Others believe the most important human resource
tool to address retention is to start addressing it from the moment the new employee walks in the door. The solution to the problem is to push the culture of retention on the people at the top and throughout the organization (Jackson, 2004). In conjunction with the culture of retention, Chief Diehl concluded with his research that an important human research strategy is to provide training for managers to understand and identify how to reduce turnover in their organization (Diehl, 2006).

Rotating paramedics through a different opportunity and allowing them to work shifts without functioning as a paramedic goes a long way to relieve burnout. Chief Diehl recommends moving paramedics to different apparatus to reduce exposure to EMS work. During his interview, Vancara states that workers must occasionally be subjected to less work. This allows the employee to “recharge” their batteries and helps to improve morale and to illustrate that management cares and are taking steps to distribute work fairly and equally. The internal questionnaire also revealed the East Hartford Fire Department paramedics would like to have an occasional break from paramedic work. Chief Griffith had a different outlook on call volume and work. His research concluded that low call volume and poor leadership topped the list of dissatisfaction (Griffith, 2006).

Several implications for the East Hartford Fire Department come from the results of this research project. It is clear to the author that the East Hartford Fire Department must respond to this emerging issue. Failure to do so may harm the organization as whole and may be detrimental to patient care and ultimately firefighter safety.

After reading the literature and analyzing the results of the research the author found that employee retention is an issue many fire departments and non-fire organizations have to deal
with. Regardless of the fire department, many of the issues with paramedic retention were very similar. The majority of the literature review and research results had many commonalities, reaffirming that the issue of paramedic retention exists nationwide.

**Recommendations**

Based on this study the author is recommending the East Hartford Fire Department establish an employee retention program. The program would be created using input from all internal stake holders. The program would include retention training for supervisors and all employees. A culture of retention should be fostered as part of the program. The cost of the initial training should be budgeted and ongoing reinforcement of training should be a minimal cost to the department with substantial gains.

A second recommendation would be to re-evaluate the compensation package currently provided to the firefighter/paramedics. A strong consideration should be given to a base stipend with a pay per shift option. The impact of this recommendation would have to be studied and negotiated with the union as the financial impact must be carefully considered and included in future budget recommendations. Establish a fire department committee to explore a new system design to provide advanced life support care and the possibility of transport. The findings of the committee could then be tested for feasibility.

Further recommendations would be to recruit internal firefighter/EMT candidates to attend paramedic school. This will help increase the number of paramedics throughout the department. Increasing the pool of paramedics would make it possible to decrease the exposure to EMS calls and reduce work overload. The impact to the budget and the cost of the schooling would also have to be investigated. It is known in Connecticut that the average cost of a paramedic class is
approximately $6000. Shift coverage would have to be examined to establish a final cost per student.

A final recommendation would be to investigate the possibility of allowing the officers to function as paramedics. There are many variations of this system. Again, the impact would need to be negotiated with the union and the budgetary impact would also have to be studied.

The author recommends to other researchers conducting research on this topic to aggressively begin applying retention strategies in their organization. Good strategic planning and input for all personnel goes a long way toward increasing retention and job satisfaction. Contacting other fire departments with high retention rates would be a prudent means of acquiring and examining paramedic retention strategies.

In conclusion, it is the author’s wish that future readers of this research will find the USFA has accomplished its goal of addressing emerging issues (National Fire Academy).
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Appendix A: Medical Questionnaire

1. Do the current CME hours meet your needs? Yes or No?

   What additional topics would you be interested in learning more about?

2. As a paramedic, do you feel the equipment you use meets your needs? Yes or No?

   What upgrades if any, would you like to see?

3. What suggestions/improvements if any, would you make to EMS departmental policies/procedures or directives?

4. Same question for Regional protocols?

5. Is the current EMD system working for you in the field? Yes or No? If no, explain why or give an example.

   Following up, are EMD concerns within dispatch being resolved? Yes or No? If not, please list examples.

6. Do you feel the QA system is working effectively? If not, please provide an explanation.

   In addition, are you receiving enough positive feedback from this system?

7. Does the medical division provide you with the necessary support in order for you to meet the requirements of being a paramedic? If not, what could we be doing differently?

8. If you have any further suggestions not covered in earlier questions, please use the space provided below.
Appendix B: Vancarra Interview

Personal Interview

Interviewee: Kenneth Vancara, General Manager
Ingenix Payment Accuracy Solutions

Date: January 15, 2010
Location: Personal Interview

Question #1: What human resource strategies do you use to help with employee retention?

Answer: The most effective strategy is to try to distribute the work load in an equal and fair manner. Specialty positions should be offered attractive retention bonuses or compensation packages. This rewards the highly needed positions and positively reinforces hard work.

Question #2: What other characteristics of employment do you believe contribute to higher employee retention rates?

Answer: Allowing your employees to have input into strategic problems and solutions helps booster empowerment. Also, employees that typically perform a disproportionate amount of work should be rewarded by giving preference to them in matters of promotion or job assignments.
Appendix C: Internal Questionnaire

Survey from www.surveymonkey.com

This questionnaire is being used to help increase paramedic retention in the East Hartford Fire Department (EHFD).

1. How long have you served as a paramedic for the EHFD?

2. Are you currently serving as a paramedic for the EHFD?

3. If yes to question 2, why have you chosen to continue to serve as a paramedic? Choose all that apply.

   ☐ ☐ Yes

   ☐ ☐ No

   ☐ ☐ Contractual mandate

   ☐ ☐ Paramedic stipend

   ☐ ☐ Educational opportunities

   ☐ ☐ Increased overtime opportunities

   ☐ ☐ preferred job assignments (e.g., Engine, Ladder, Squad)

   ☐ ☐ Increased call volume

   ☐ ☐ EMD protocols (ALS vs. BLS)

   ☐ ☐ EMS system design (ALS Engines)

   ☐ ☐ Increased job satisfaction

        Other (please specify)

4. If no to question 2, why have you chosen not to continue to serve as a
Increasing Paramedic Retention

5. What characteristics of employment (i.e., benefits, duties, compensation,) do you feel would increase paramedic retention in the EHFD?

One

Two

Three

Four

Five

Six

Seven

6. Please feel free to add any additional comments on the subject of paramedic retention.

☐ ☐ No contractual mandate

☐ ☐ Uneven distribution of work

☐ ☐ preferred job assignments (e.g., Engine, Ladder, Squad)

☐ ☐ Compensation

☐ ☐ Increased responsibility

☐ ☐ Lack of job satisfaction

☐ ☐ EMS system design (ALS Engines)

☐ ☐ Increased call volume
☐ ☐ EMD protocols (ALS vs. BLS)

Other (please specify)

Thank you very much for taking the time to answer this questionnaire.

William Perez
Assistant Fire Chief
East Hartford Fire Department
Appendix D: External Questionaire

Survey from www.surveymonkey.com

Page 1

This questionnaire will be used to assist the East Hartford Fire Department in creating paramedic retention strategies.

1. Demographic Information

Department:

Address:

City/Town:

State:

2. Does your fire department provide paramedic level emergency medical service?

1. If yes to question 2, what is the mandatory commitment time to provide ALS care for your paramedics?

2. For paramedics in your department, what is the average retention beyond their mandatory commitment?

☐ ☐ Yes

☐ ☐ No
3. Do your department's paramedics also function as firefighters?

4. Does your department allow line officers to function as paramedics?

5. Which service does your department provide? Check all that apply.

6. What type of EMS system design does your department utilize? Check all that apply.

□  □  Yes

□  □  No

Other (please specify)

□  □  ALS intercept
7. What additional benefits do a paramedic in your department receive for providing ALS care? Check all that apply.

8. What human resource strategies does your department use to help increase paramedic retention?

□ □ □ None
9. What do you feel are the main reasons paramedics in your department continue to serve as paramedics? Choose all that apply.

☐ ☐ Salary

☐ ☐ Contractual

☐ ☐ Educational opportunities

☐ ☐ Overtime

☐ ☐ Job assignments

☐ ☐ Job satisfaction

☐ ☐ EMS system design

☐ ☐ Emergency medical dispatch protocols

☐ ☐ Call volume

☐ ☐ Distribution of work
10. Why do you feel your department's paramedics choose to not continue to serve as a paramedic? Check all that apply.

11. What characteristics of employment (i.e., benefits, duties, compensation) do you feel would increase paramedic retention rates in your department?

1

2

3

4

5

6

7

☐ ☐ Salary

☐ ☐ Contractual

☐ ☐ Educational opportunities

☐ ☐ Overtime
12. Please feel free to add any additional information on paramedic retention.
Appendix E: Email

To present and former EHFD Paramedics,

I am currently conducting research on paramedic retention in the East Hartford Fire Department. This questionnaire looks at retention as a whole, not specifically system design. Please take a few minutes to answer the questionnaire at your convenience. Any, and all information is welcome and appreciated. I will present the research when it is all complete. The questionnaire is confidential and can be accessed from any computer. Please go to the hyperlink below which will bring you directly to the questionnaire.

Thank you very much,

Will

William Perez
Assistant Fire Chief
East Hartford Fire Department
31 School Street
East Hartford, CT 06108
Office (860)291-7401
Fax (860)610-6285

http://www.surveymonkey.com/s/ZNWNG2R
February 5, 2010

Dear Chief,

I am currently enrolled in the National Fire Academy’s Executive Fire Officer Program which requires an applied research project. My project consists of researching strategies for firefighter/paramedic retention. The information gathered for this project will assist the East Hartford Fire Department in developing retention strategies.

I fully understand the demands of your busy schedule. I have made the questionnaire as concise as possible. There are no required answers to this questionnaire, so you can skip questions you may not be able to answer. I am very grateful for your time in helping us with this questionnaire and would greatly appreciate your response by February 19, 2010.
Your participation in this questionnaire will require you to go to the attached hyperlink, complete the questionnaire and click “Done” at the end of the questionnaire.

http://www.surveymonkey.com/s/ZNWCBH3

Your help in this applied research project will not only assist the East Hartford Fire Department but also any other department that finds the information beneficial. Thank you in advance for your help and cooperation.

With my appreciation,

William Perez

Assistant Fire Chief

wperez@ci.east-hartford.ct.us
Appendix G: Type of Service Provided

1 Our department staffs transport units and provides ALS on that crew, or off of an engine. We also support four volunteer agencies with ALS from our engines when they are a BLS crew.

2 BLS non-transport, paramedics assist County ambulance staff

3 We do ALS Transport and ALS Intercept. We also do BLS transport if ALS is not necessary.

4 ALS first response, fire apparatus only

5 We provide 911 ALS as well as transport those local 911 patients and out-of-town, interfacility ALS transports as far as 200-300 miles.

6 As mentioned above, we are BLS to the platform of ALS support.

7 ALS first responder. Transport is currently provided by a private ambulance provider.

8 First responder ALS

9 BOTH INTERCEPT AND TRANSPORT

10 First response ALS (not familiar with intercept terminology).

11 Both: ALS intercept (Engines) and ALS transport (Airport only)

12 We only transport if there is no commercial ambulance available. We also transport if there is a delay in the response time from the commercial company.

13 ALS/ BLS, Private Transport

14 We provide ALS transport along with occasional intercept with neighboring towns.

15 ALS Assessment Engines, non-transport

16 ALS transport and ALS intercept

17 Transport capable, but do not routinely transport - provide ALS First Responder
Appendix H: Q7 Additional benefits for being Paramedic

1 10% additional salary each December based on successful completion of quarterly skills labs and maintaining all certifications. Roughly $6,000/yr.

2 The FF/Paramedics are paid more than our FF/EMT-Intermediates. The overtime for paramedics is a little more because of the inter-facility transports and we have more FF/paramedics than FF/EMT-Intermediates.

3 They function as firefighters and can work as acting MSO's or acting Lieutenants on a fire company when training for the same has been completed and their services are not needed on a medic unit. We function with a minimum number of paramedics to ensure high ALS patient contact; they do not respond to or transport BLS patients.

4 Fire Paramedic is a ranked position with pay equivalent to that equal to a Fire Engineer. Top grade Paramedics are paid $ 53,728 to $ 68,776 annually.

5 5% pay above base, and overtime for calls and education

6 All of our line firefighters and officers are paramedics. This is an entry-level requirement.

7 Transport pay for medics ($35) and EMTs ($25)

8 $450 per month stipend, all employees receive education incentive pay and reimbursement of tuition.

9 They receive $150 extra a month

10 Paramedic incentive that is consistent for all PMs.

11 As far as education we pay the paramedic's for CME's and their core class.

12 In addition to a stipend, our Continuing Education classes and license fee are paid for/covered.

13 Also details can be worked by paramedics.

14 Credit during the promotional testing

15 There would be a slight increase in OT when we are forced to hire MICT credentials. In those situations the basic EMT's are restricted from working so it does provide them more opportunities.
5% increase in pay over an EMT-Basic
Appendix I: Characteristics of Employment

1. Better retirement system More educational opportunities

2. Less paperwork and less time on computer electronic reporting.

3. Higher salaries rotate from the Medic unit to the engine more often

4. Salary rotation

5. The rate is so high now the only way to keep more might be to equal the pay to Captain

6. Increasing our staffing to three person rescues Lieutenants on rescues

7. We do not have a retention issue.

8. Continuing the years of service bonus increased ALS pay supplements

9. Our salaries are lower than the neighboring department - so to raise salaries

10. N/A

11. Salary compensation able to perform as an engineer and remain a paramedic - and higher salary

12. No needed in that we have no issue with retention

13. A realization on the part of management that the shift in service delivery trends requires a shift in minimum qualification standards.

14. End time of commitment

15. Higher salary More of a being team player feeling

16. Requirement better Promotional opportunities

17. Increase pay to a small extent possibly additional benefits, i.e., vacation.

18. 10% over base pay for all ALS first responders
Increasing Paramedic Retention

19 work schedule promotional opportunities

20 better salary progressive protocols

21 We hire certified paramedics or EMTs currently enrolled in a paramedic course.

22 Not an issue

23 Benefits

24 None

25 N/A

26 Increase annual stipend Develop EMS career ladder

27 None

28 Increase bonus pay

29 RETIREMENT BENEFITS HIGHER SALARY

30 salary benefits

31 money!

32 compensation

33 Better stipends More equitable distribution of work, shortage of medics creates burnout

34 compensation distribution of work

35 compensation rotation off of ambulance onto slower units

36 Additional compensation for precepting new medics and students Being part of a different region (outside of the north central region)

37 Job Requirements Compensation
38 Not applicable in our system

39 EMS system changes that in the state of CT all protocols are the same in the state more flexible educational hours

40 rotation of assignments on a day to day or shift to shift basis increase in stipend with increase of responsibility

41 N/A

42 Addition medics to share the EMS work load to minimize burnout Additional medics provide the opportunity to perform engine and truck work

43 Increased manpower (i.e., hire more paramedics) Increase pay (i.e., significantly increase stipend)

44 Increased salary might make those that left decide to stay.

45 Pay increase (to at least level of close jurisdictions) acknowledgment of work/contribution

46 more money Lieutenants on rescues.

47 continue to make sure the workload is shared among ALS & BLS the more medics we have the better as more experienced ones get off of boxes

48 reduce call valome contract

49 Even higher separation in pay from MICT to FF's. Additional consideration for promotional opportunities.

50 N/A

51 Extra pay Distribution of call volumes due to more medic trucks

52 compensation addition of another medic vehicle

53 na

54 Salary Benefits
Appendix J: Human Resource Strategies

1. Mandatory 3 year commitment after graduating academy - under contract


3. Honest Fair education supportive

4. The fact that Paramedics run ALS calls only is a direct benefit to maintaining long-term participation. The training program itself is an internship and not matched in many communities. 15% above Top Firefighter Salary and an 2.5% bump for their ALS Certification when an Associates or other formal education has not been achieved. Because paramedics are a finite resource they work more OT than the average.

5. In-house ACLS In-house PALS Monthly EMS training CEU’s from hospital lectures CEU’s from on-line training and conferences

6. There is no retention issue with our Paramedics.

7. Incentive Pay

8. We have given a year's of service bonus previously

9. Incentive Pay Provided CEU's Provided required classes other than CEU's Payment of State Certification

10. none needed

11. Personal contact, recognition Goal of providing non-transport ALS off the apparatus

12. Additional pay based upon years of service

13. As a result of the fact that over 70% of our call volume is EMS, certification is a condition of employment at all levels. All officers including the chief retain certification which communicates a commitment on behalf of management.

14. None
15 5 year CME Recertification

16 New hire requirements Allowing Captains as Paramedics Increase allowing engine time

17 We have quarterly inservices with the system medical director

18 Retention Bonus Separate Classification with Separate Promotional List

19 encourage and pay for continuing education Try to stay competitive in salary and benefits

20 None at this time.

21 Rotation off of transport units 1-shift per month Certification Allowance ($1750/yr) - Pd to everyone who has PM certification

22 Paramedic certification is required for promotion.

23 None

24 Excellent Benefit package Longetivity pay

25 Paramedic Engines Increase in pay and training Working on call volume

26 The ability to work both Firefighter and Paramedic overtime. Paramedics have triple the funds available per individual for training. Paramedics have a reduced "station load" when it comes to station/equipment maintenance

27 None. It's never been a problem.

28 Training opportunites Annual Stipend for Paramedics

29 No specific strategies

30 Mandatory commitment to the paramedic program for specified terms.

31 15% pay differential all certifications, and recerts are paid for by department EMS conferences

32 none
33 Pay them $50.00 everyday they ride the unit.

34 positive labor-management relationship EMS training rotation of station/unit assignments incentive pay

35 Program incentive pay

36 Financial penalty for leaving employment within first 5 years of career, never tested We reserve the right to reach down into hiring lists for paramedics and paramedic students

37 none

38 rotation from ambulance to rescue or engine

39 None: Part of the job description

40 Workplace Satisfaction Great Labor Management Relationship Continuous Employee Input Good Working Conditions and Station Environment Good Salary and Benefit Package

41 We try to keep the stipends Make sure they all have the updated equipment pay for their education (CME's)-Core Classes

42 none

43 Its an essential component of staying employed

44 Additional Firefighting opportunities through training Paramedic recruiting and testing to increase the departments medic personnel Hiring preference to Paramedics on entry level testing

45 None that I know of.

46 Accelerated advancement opportunities Earlier access to "management" level benefits

47 none

48 none that I can think of.. except our department is desirable to work for

49 $$ all BLS & ALS share the workload - BLS ride the back as much as ALS does
50 Primarily answered in Question 7. No other HR strategies come to mind for MICT retention.

51 None

52 Providing continuing education training Prospect of more overtime

53 NA
Appendix K: Internal Question characteristics

1 DO NOT LET MEDICS MAKE THEIR OWN DEALS. EITHER YOU ARE IN OR YOU ARE OUT. Try not to move medics from house to house without notification.

2 Improve the system Improve the system

3 no tablets, paper run forms hard boxes vs soft sided ones

4 Better Paramedic compensation based on years within the department the current plan only benefits a couple of people Better paramedic scheduling for each shift so you know when and where you will be

5 increased compensation less moving between firehouses

6 Compensation Change to system - try two medic trucks

7 go back to the medic unit or a medic unit and fly car increase paramedic bonus

8 More control over the system by "working" medics Regain the respect that East Hartford Medic title used to hold with it

9 Higher stipend Ability to hand off routine als

10 Compensation More equal distribution of work

11 Monetary compensation Duties - More opportunity to not have to be the medic and better teamwork within the crew (don't make the medic do everything - pitch in and help where possible)

12 less riding in better medic bonus

13 Increased stipend

14 Rotations off from being a paramedic Different transfer of care policies. We don't need to have two paramedics (EHFD & ASM) on a routine call

15 money medics want more money competent medics do not like minutea, so stop it

16 compensation workload
17 compensation educational opportunities

18 compensation

19 Change in medical division staff personnel Making a "medic unit" program work rather than medic engines

20 More education provided on site. Like a DAMS or PEPP class.

21 Duties Compensation

22 increased compensation decrease in useless calls

23 workable system transport capabilities

24 compensation per shift not a yearly stipend equal work distribution per group

25 Change in ALS delivery (either 2 fly cars or ambulances Better stipend

26 Compensation Benefits, such as additional compensated training opportunities

27 Hand off ALS to Ambulance More Money

28 hire more medics to share work load no money

29 compensation different system "no als engines"

30 Pride

31 many that were here to experience the medic units say that said system is better than the ALS engines.

32 Allow officers to function as paramedics if even on a limited basis

33 Increase the medic stipend (see below) Allow for "non-transport" medics at reduced stipend

34 Better EMD, there are too many unnecessary ALS responses to Non ALS incidents Ability to pass off Routine ALS calls
Appendix L: Q 11 External Characteristics of Employment

1 Better retirement system More educational opportunities Better pay, yearly increases More adequate staffing.

There are a limited group of ALS providers to staff medic unit. Personnel get burnt out due to high call volume.

2 Less paperwork and less time on computer electronic reporting.

3 Higher salaries rotate from the Medic unit to the engine more often continued education in the field of EMS positive reinforcement support the paramedic program

4 salary rotation extended benefits

5 The rate is so high now the only way to keep more might be to equal the pay to Captain

6 Increasing our staffing to three person rescues Lieutenants on rescues

7 We do not have a retention issue.

8 Continuing the years of service bonus increased ALS pay supplements

9 our salaries are lower than the neighboring department - so to raise salaries

10 N/A

11 salary compensation able to perform as an engineer and reamin a paramedic - and higher salary

12 no needed in that we have no issue with retention

13 A realization on the part of managment that the shift in service delivery trends requires a shift in minimum qualification standards.

14 end time of commitment

15 Higher salary More of a being team player feeling Less negative over sight from superiors

16 Requirement better Promotional opportunities

17 increase pay to a small extent possibly additiona benefits, i.e., vacation.
18 10% over base pay for all ALS first responders

19 work schedule promotional opportunities

20 better salary progressive protocols emergency runs only

21 We hire certified paramedics or EMTs currently enrolled in a paramedic course.

22 Not an issue

23 Benefits

24 None

25 N/A

26 Increase annual stipend Develop EMS career ladder Develop additional EMS officer positions in administration

27 None

28 Increase bonus pay

29 RETIREMENT BENEFITS HIGHER SALARY

30 salary benefits work distribution (i.e. breaks from attending)

31 money!

32 compensation

33 Better stipends More equitable distribution of work, shortage of medics creates burnout Points on entry level exam

34 compensation distribution of work

35 compensation rotation off of ambulance onto slower units making the getting of their CME easier. The system should look at the requirements they are placing on the medics Paying for them to attend mandatory required training
36 Additional compensation for precepting new medics and students. Being part of a different region (outside of the north central region) For some medics, being able to "turf" ALS calls to ALS transport units.

37 Job Requirements Compensation Contractual

38 Not applicable in our system

39 EMS system changes that in the state of CT all protocols are the same in the state more flexible educational hours more communication between the hospitals

40 Rotation of assignments on a day to day or shift to shift basis increase in stipend with increase of responsibility

41 N/A

42 Addition medics to share the EMS workload to minimize burnout. Additional medics provide the opportunity to perform engine and truck work.

43 Increased manpower (i.e., hire more paramedics) Increase pay (i.e., significantly increase stipend)

44 Increased salary might make those that left decide to stay.

45 Pay increase (to at least level of close jurisdictions) acknowledgment of work/contribution

46 More money. Lieutenants on rescues. 3 person crew on a rescue unit. Opportunity to ride an engine and switch to rescue kelly day to kelly day.

47 Continue to make sure the workload is shared among ALS & BLS. The more medics we have the better as more experienced ones get off of boxes pay for medic class tuition and books, and give time off for class & rotations.

48 Reduce call volume contract increase salary reduce service time before retirement

49 Even higher separation in pay from MICT to FFs. Additional consideration for promotional opportunities. Ability to practice ALS skills more often - both field and clinical opportunities. Having a process that allows personnel to complete clinical requirements on duty and being more flexible with employees during paramedic course would probably yield higher numbers of current employees seeking certification.
50 N/A

51 Extra pay Distribution of call volumes due to more medic trucks Good partners Proactive medical director

52 Compensation addition of another medic vehicle job recognition by supervisors

53 na

54 Salary Benefits