



DISSERTATION APPROVED BY

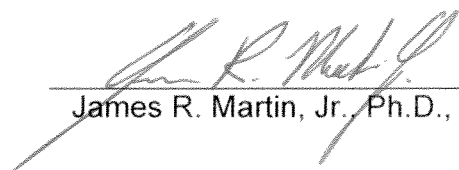
October 11, 2013
Date



William Raynovich, Ed.D, Committee Chair



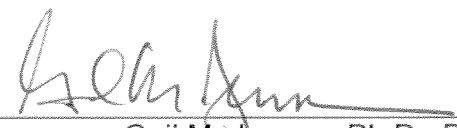
Peggy Hawkins, Ph.D., Committee Member



James R. Martin, Jr., Ph.D., Committee Member



Isabelle Cherney, Ph.D., Ed.D. Program Director



Gail M. Jensen, Ph.D., Dean

LRNG EMS LDRSHIP: Multinational Qualitative Study

**HOW LEADERSHIP IS LEARNED IN EMERGENCY MEDICAL SERVICES:
A QUALITATIVE STUDY AMONG EMERGENCY MEDICAL SERVICES
PROVIDERS FROM MULTIPLE NATIONS
WORKING IN RIYADH, KINGDOM OF SAUDI ARABIA**

By

WILLIAM J. LEGGIO, JR.

A DISSERTATION FOR EDUCATIONAL DOCTORATE PROGRAM
IN LEADERSHIP

Submitted to the faculty of the Graduate School of Creighton University in Partial
Fulfillment of the Requirements for the degree of Doctor of Education in
Interdisciplinary Leadership.

Omaha, NE

October 11, 2013

UMI Number: 3630488

All rights reserved

INFORMATION TO ALL USERS

The quality of this reproduction is dependent upon the quality of the copy submitted.

In the unlikely event that the author did not send a complete manuscript and there are missing pages, these will be noted. Also, if material had to be removed, a note will indicate the deletion.



UMI 3630488

Published by ProQuest LLC (2014). Copyright in the Dissertation held by the Author.

Microform Edition © ProQuest LLC.

All rights reserved. This work is protected against unauthorized copying under Title 17, United States Code



ProQuest LLC.
789 East Eisenhower Parkway
P.O. Box 1346
Ann Arbor, MI 48106 - 1346

LRNG EMS LDRSHIP: Multinational Qualitative Study

ABSTRACT

The purpose of this study was to learn how leadership is learned within an international context in Emergency Medical Services (EMS) by interviewing EMS professionals working in Riyadh, Kingdom of Saudi Arabia. Those interviewed either worked in EMS or had EMS training in countries other than Saudi Arabia. Each interview sought to understand the interviewee's experience of learning and experiencing leadership as well as their recommendations on leadership. This study began in June of 2013 and included 19 participants.

EMS systems have similar roles and responsibilities in many countries around the world. At the most basic level, EMS systems are tasked with providing transport to a hospital. There is a requirement for stronger integration within traditional healthcare systems and evolving more complex systems to ensure public and emergency response. EMS systems continue to develop and evolve in countries worldwide. Therefore, the topic of leadership requirements for international EMS systems needed to be better understood. This clarity required further research.

This qualitative study took a phenomenological approach to examine shared international experiences of learning and experiencing leadership within the EMS profession. The data was collected during recorded conversations. The transcripts of the conversations were developed into coded themes (a) how leadership was learned; (b) who are leaders in EMS; (c) what are leadership qualities, characteristics, and capabilities; and (d) what are future needs for leadership development.

LRNG EMS LDRSHIP: Multinational Qualitative Study

Three major implications emerged from the narrative transcripts, the recommendations by the participants, and connections made between the data and literature reviewed in this study. First, EMS education and training institutes need to develop a progression of leadership courses that integrate simulations, internships, and moves beyond leadership in the field to explore fully organizational and strategic leadership. Second major implication was for EMS licensing or certifying bodies to engage in requiring continuing education, not only on the technical skills within the profession, but on leadership development. Last major implication was for EMS systems to yield better leaders through objective processes, such as formal mentoring programs. In general, the EMS profession needs to engage in dialogue to address leadership development needs.

LRNG EMS LDRSHIP: Multinational Qualitative Study

ACKNOWLEDGEMENT

Great leaders realize that it takes others to achieve great things and this dissertation is no exception. I owe a great deal of my academic and professional achievements to Dr. William Raynovich, who not only guided me as my committee chair but also has been a mentor for nearly a decade. In addition, Dr. Peggy Hawkins, who also served on my committee, has provided invaluable feedback and significantly contributed to my success in completing this dissertation. Similarly, Dr. Jim Martin provided guidance on clarity in my writing and recommendations to improve this dissertation. Elveta Bishop, my trusted editor, has through her steadfast support and guidance, allowed me to complete the dissertation process.

I also want to acknowledge Dr. Isabelle Cherney and the entire Ed.D. program at Creighton University for their dedication to my education and continued support. Lastly, I want to acknowledge Creighton University for contributing to my success and specifically the Graduate School, the Werner Institute within the Law School, and the EMS Education program for providing me with an education that is second to none.

LRNG EMS LDRSHIP: Multinational Qualitative Study

DEDICATION

I dedicate this personal achievement to very special people in my life. My father, William J. Leggio, Sr. who gave me his name and provided support in his own unique way. My mother, Marialice Leggio who provided me with values and guidance rooted in experience. I dedicate this achievement to my close friends near and far who supported me throughout the process. Though there are many who supported me, it was my fiancé Katelyn van Galder who provided me with the most support and encouragement to complete this dissertation. Katelyn, I look forward to our many years together and share credit with her for completing this process.

LRNG EMS LDRSHIP: Multinational Qualitative Study

TABLE OF CONTENTS

ABSTRACT	iii
ACKNOWLEDGEMENT.....	v
DEDICATION.....	vi
Chapter 1 — Introduction	1
Background and Significance.....	1
Problem Statement	1
Purpose Statement	2
Research Questions.....	3
Study significance.	3
Delimitations.....	4
Definition of terms.	4
Autobiographical Statement.....	7
Chapter 2 — Review of the Literature	9
Opening Comments	9
Emerging Global Challenges in the Field of EMS	10
Implications of inadequate response infrastructure.....	12
Global socio-economic infrastructure implications.	13
The Demand for Leadership in EMS: A Compelling Need for Change	15
EMS: An expert culture of colleagues.	17
Field leadership requirements.	21
Categories of field leadership.....	23
EMS Leadership versus EMS Management	24

LRNG EMS LDRSHIP: Multinational Qualitative Study

Failures of leadership: missed opportunities.	26
Failures of leadership: indecision.	26
Failures of leadership: embracing the need for culture change.	27
The Status of EMS Leadership Development	30
The absence of clear leadership training standards in EMS.	30
Professional development: the importance of actions first.	33
Current evolution of leadership.	35
Rationale for this Study	37
Chapter 3 — Research Methodology	40
Introduction	40
Ethical Considerations	40
Research Design	41
Population and Sample	42
Sampling Procedures	43
Instrumentation	44
Data Collection Tools and Procedures	46
Chapter 4 — Results and Analysis	47
Introduction	47
Data Analysis	47
Validating the Findings	48
Member checking	48
Bracketing	49
Auditor	49

LRNG EMS LDRSHIP: Multinational Qualitative Study

Triangulation. 49

Summary of Interviews..... 50

How Leadership was Learned..... 52

 Mentoring. 52

 Experience. 54

 Other professions..... 55

 Courses..... 57

 Content that was not taught. 62

Leadership Roles within EMS 63

Leadership Skills, Qualities, and Characteristics 65

 Communicators and listeners..... 65

 Problem solvers, decision makers, and administrative abilities..... 67

 Empower, encouragement, and trust. 69

 Interpersonal skills. 70

 Professional skills and characteristics..... 74

Future Need: Development of Leadership Education 82

Summary..... 88

Chapter 5 — Conclusion and Recommendations..... 89

 Introduction 89

 Summary of the Study..... 89

 Findings Related to the Literature 97

 Surprises..... 105

 Conclusions 106

LRNG EMS LDRSHIP: Multinational Qualitative Study

Implications for action. 106

Recommendations for future research. 106

Concluding remarks. 107

Appendix A: Interview Process Details 113

 Interview Protocol: 113

 Questions:..... 114

 Written Consent Form 115

 Leadership Education in Emergency Medical Services..... 115

 Protocol for Verbal Consent 120

Appendix B: Demographic of Participants 122

Appendix C: Findings -- How Leadership was Learned 123

 Node Summary 123

 Node Details..... 123

Appendix D: Findings – Leadership Roles in EMS 144

 Node Summary 144

 Node Details..... 144

Appendix E: Findings – Leadership Skills, Qualities, and Characteristics 152

 Node Summary 152

 Node Details..... 152

Appendix F: Findings – Future Needs: Development of Leadership
Education 197

 Node Summary 197

 Node Details..... 197

LRNG EMS LDRSHIP: Multinational Qualitative Study

References 205

Chapter 1 – Introduction

Background and Significance

This qualitative study discovered how Emergency Medical Services (EMS) providers from different nations working in Riyadh, Kingdom of Saudi Arabia learned leadership and provided their suggestions for future EMS leaders. EMS is a profession designed to have Emergency Medical Technicians (EMT) and/or Paramedics respond, treat, and transport patients who suffer from the results of illness and or trauma. EMS organizations and leaders are not limited to ensuring these types of responses. EMS leaders have an interdisciplinary role with other agencies in planning for future response requirements in an environment where the level of uncertainty portends many unknowns in what those future response requirements may actually be. Therefore, EMS leaders are tasked with not only leading daily operations and engaging in developing mutual aid response agreements with other first responding agencies, but also with being part of decision-making at both the local and federal levels (Catlett, Jenkins and Millin, 2011; Lester and Krejci, 2007).

Problem Statement

How leadership is learned in an international context by those in EMS is not widely understood. The topic of how leadership in EMS is learned in different nations has not been well-researched or discussed from a scholarly perspective. EMS curriculum guidelines published at national levels do mention leadership, but do not delve into specific leadership skills (National Highway Traffic

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

Administration, 2004; College of Paramedics: British Paramedic Association, 2008). Even though the roles for EMS leadership at local and federal levels are known (Catlett et al., 2011; Garza, 2009; Lester & Krejci, 2007), national curricula guidelines remain largely focused on the medical knowledge needed by EMTs and Paramedics, and the level of proficiencies needed to safely perform interventional skills (National Highway Traffic Safety Administration, 2010). The discussion on the topic of leadership theory and leadership skills needed in EMS has remained outside of these curricula guidelines.

Within EMS publications, EMS professionals have analyzed different styles or theories of leadership and applied the theories to the profession. There remains a high level of importance and interest in scholarly research to substantiate and differentiate EMS leadership (Brink, Back-Peterson, & Sernert, 2012). The critical nature of understanding how leadership in EMS is learned is not limited to one country, but is needed internationally as the role of EMS during emergencies is a growing topic in international emergency medicine (Morton and Vu, 2011). Thus, the need for further understanding on leadership in EMS at the international level is recognized as an unmet need.

Purpose Statement

The purpose of this phenomenological qualitative study was to interview EMS providers from multiple nations who were working in Riyadh, Kingdom of Saudi Arabia, and to explore how and what they learned about leadership in EMS during their education, their multinational careers, and based on their experiences. The research described in this study identified what skills are

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

needed for future leaders in EMS based on the individual and collective perspectives of the participants.

Research Questions

The central question of this study was: How is leadership learned in an international context by those in EMS? The sub questions were:

1. How and what did those surveyed learn about leadership as EMS students?
2. How and what did those surveyed learn about leadership during their careers in EMS?
3. Who do those surveyed identify as leaders in EMS organizations?
4. What do those surveyed recommend be taught on the topic of leadership to EMS students?
5. What skills do those surveyed believe future EMS leaders should develop?

Study significance.

It is known that EMS has a strong history of leadership in disaster management, coordinating response efforts, and patient care including triage (Catlett et al., 2011). The history of leadership in EMS does not provide answers to how leadership was learned, but is marked with strong criticisms of leadership performance and the need for further research and understanding on the topic of leadership, and the absence thereof, in EMS. This study is significant because it added to the limited body of scholarly knowledge in EMS. This addition will begin

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

to satisfy the need for further research on the topic of leadership in EMS by researching how those with multinational experiences in EMS learned leadership as a student and throughout their career. The research sought suggestions for leadership skills that should be taught to future EMS leaders. These research findings will serve EMS training programs, educators, and those who supervise EMS education programs around the world by identifying topics of leadership and leadership skills that are necessary to supplement current of EMS curricula and educational programs. The second population to gain from this study will be EMS professionals around the world who are identifying areas for improvement within their organizations, developing continuing education, and recommending paths for professional development for their own organizations.

Delimitations.

A delimitation of this study was that the EMS providers from multiple nations that were interviewed as they were located in Riyadh, Kingdom of Saudi Arabia and actively associated with an EMS service there. The interviews were completed in the English language. An additional delimitation of this study was that the respondents have trained and/or worked in a location other than the Kingdom of Saudi Arabia.

Definition of terms.

Disaster Medical Assistance Teams (DMAT). These teams consist of individuals who respond to provide disaster medical assistance and humanitarian aid during large-scale incidences (Aitken et al., 2012).

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

Emergency Department (ED) or Emergency Room (ER). A hospital room or area staffed and equipped for the reception and treatment of persons with conditions (as illness or trauma) requiring immediate medical care (Emergency Room, n.d.).

Emergency Medical Services (EMS). A national network of services coordinated to provide aid and medical assistance from primary response to definitive care; the network involves personnel trained in rescue, stabilization, transportation, and advance management of traumatic and medical emergencies (Sanders, 2012, p. 3).

Emergency Medical Technician (EMT). This is considered the minimum level of certification for ambulance personnel. EMTs provide basic-level medical and trauma care and transportation to a medical facility (Limmer, O'Keefe, 2012, p. 9).

Incident Commander (IC). Solely responsible (within the confines of his or her authority) for establishing incident objectives and strategies. The IC is directly responsible for ensuring that all functional area activities are directed towards accomplishment of the strategy (U.S. Department of Homeland Security, 2008, p. 51).

International Emergency Systems (IES). These systems have varied features and practices and resemble the main models of EMS systems in one way or another to provide the arrangements of personnel, facilities, and equipment for the effective, coordinated, and timely delivery of health and safety services to victims of sudden illness or injury in a way that meets the local needs and targets with diverse culture, political, and financial factors of each individual community (Al-Shaqsi, 2010)

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

International Emergency Medicine (IEM). A discipline of medicine that involves international emergency medical systems development and the establishment of emergency medicine residency training and educational programs abroad, with some training in broader public health concepts such as disaster and humanitarian response with the inclusion of training in additional aspects of nonemergency international public health development (Morton and Vu, 2011, p. 521).

Mass Casualty Incident (MCI). An event for which available resources are insufficient to manage the number of casualties (Sanders, 2012, p. 1478).

Mutual Aid Agreement (MAA). An agreement between neighboring emergency agencies to exchange equipment and personnel when necessary (Sanders, 2012, p. 1478).

National Incident Management System (NIMS). A systematic, proactive approach to guide departments and agencies at all levels of government, nongovernmental organizations, and the private sector to work seamlessly to prevent, protect against, respond to, recover from, and mitigate the effects of incidents, regardless of cause, size, location or complexity, in order to reduce the loss of life and property and harm to the environment (U.S. Department of Homeland Security, 2008, p. 1).

Paramedic. A person who has completed training consistent with the National EMS Education Standards, including advanced training in clinical decision-making, patient assessment, cardiac rhythm interpretation, defibrillation, drug therapy, and airway management (Sanders, 2012, p. 3).

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

Team Leader. An EMS provider who has many roles, including maintaining an overall patient perspective, providing leadership to the team by designating tasks, and coordinating transportation (Aehlert, 2011, p. 619).

Unified Command (UC). Individuals designated by their jurisdictional or organizational authorities (or by departments within a single jurisdiction) who must jointly determine objectives, strategies, plans, resources allocations, and priorities and work together to execute integrated incident operations and optimize the use of assigned resources (U.S. Department of Homeland Security, 2008, p. 51).

Autobiographical Statement

The author of this study is from the United States of America (U.S.). The researcher holds a Bachelors of Science in EMS, a Masters of Science in Negotiation and Dispute Resolution, and completed this dissertation for his Educational Doctorate (Ed.D.) in Interdisciplinary Leadership. Upon completion of the Ed.D. all of the researcher's degrees have been awarded through the same Midwestern Jesuit University. The researcher was an adjunct EMS instructor for the same Midwestern University, and worked in two clinical environments of emergency medicine both as an employee and volunteer in EMS. The researcher's volunteer experience included firefighter training and experiences.

The author maintained National Certification and two state licensures, one with a Critical Care endorsement. At the time of this study, the researcher had not worked in a role to provide EMS outside of the U.S. However, the author was

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 1

employed in Riyadh, Kingdom of Saudi Arabia, as an EMS instructor for a public university, the term of employment that started in September 2011, while conducting this study.

Chapter 2 – Review of the Literature

Opening Comments

This qualitative study focused on answering how leadership is internationally learned in Emergency Management Services (EMS) from EMS providers with international experience. Secondary study questions of this scholarly work focused on studying how those surveyed learned leadership as students and professionals, and what skills and education they believed were needed for future EMS leaders to be successful. The merit of this study is that it added to the limited body of scholarly knowledge in EMS on the topic of leadership. There was a global need for identifying and clarifying the leadership skills and characteristics in EMS.

This chapter is an exploration of relevant literature on leadership in EMS. The majority of the literature search was conducted over approximately four weeks with the assistance of Library Specialists at Creighton University. Search terms used in multiple combinations for retrieving literature were ‘leadership,’ ‘Emergency Medical Services,’ ‘multi-national,’ ‘multi-cultural,’ ‘international,’ and ‘emergency responders.’ Evaluation of published research continued until the completion of the dissertation.

The literature collected and reviewed started with emerging global challenges in the field of EMS. The literature review established a demand and compelling need for leadership within EMS. This compelling need for leadership within EMS can be directly related to the changing EMS culture. This study further analyzed the current status of EMS leadership development.

Emerging Global Challenges in the Field of EMS

Disaster can strike anywhere and may require a response ranging from local systems to the federal government or military. This reality has created positions in EMS for highly-trained professionals in leadership who are capable of engaging in interdisciplinary efforts with multiple types of agencies. Catlett, Jenkins and Millin (2011) listed multiple types of agencies as law enforcement, military, specialized search and rescue teams, fire, rescue, hospitals, public health, and public utilities (p. 423). Being able to engage in Mutual Aid Agreements (MAAs) and Unified Command (UC) structures are two reasons why EMS students need leadership education. Creating Mutual Aid Agreements may be the responsibility of EMS organizational leaders, but initial UC roles may be assigned to the initial EMS responders. This evolving demand has created a need for leadership skills and abilities that cross all levels of EMS professionals and providers.

Aitken et al. (2012) collected data via an anonymous survey of Australian Disaster Medical Assistance Teams (DMAT) who deployed to the 2004 Asian Tsunami Disaster. Aitken et al. (2012) reported an approximate 50% return rate on the survey designed to evaluate leadership issues and use of standards in Australian DMATs. These DMAT members were quite experienced with 53% of the respondents in the 45 – 55 years of age range, 75% were male, and 58% had significant experience in international disasters (Aitken et al., 2012, p.142).

The Aitken et al. (2012) quantitative survey asked respondents to answer statements with Strongly Disagree, Disagree, Neither Disagree or Agree, Agree,

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

and Strongly Agree, with an option for Not Applicable/Missing (p. 143). Aitken et al. (2012) provided two statements focused on leadership and command:

“Leadership training is essential for DMAT [Disaster Medical Assistance Teams] commanders and there needs to be a clear command structure” (p. 143). Aitken et al. (2012) reported a strong support of 85% for leadership training for DMAT commanders. The remaining 15% neither agreed nor disagreed with the statement. The second statement regarding the need for a clear command structure received unanimous support (Aitken et al., 2012).

With these results, Aitken et al. (2012) discussed an Israeli study on the response of the Thai medical system to the 2004 Tsunami Disaster and the findings that supported leadership as being crucial for effective functioning. Aitken et al. (2012) compared this report to the Project Hope/United States Naval Ship (U.S.N.S) attributing much of its success to quality leadership. Aitken et al. (2012) discussed how these international experiences in inter-agency coordination revealed issues of jurisdiction, authority, capacity, and competency, all of which are leadership issues requiring attention and development.

The role of leadership in large-scale disasters that required federal response was a focus of discussion in the research by Aitken et al. (2012). It is important to remember this is only one type of emergency in which EMS leaders may find themselves involved. EMS leaders may also find themselves in the midst of an active shooter attack or an emergency medical response, and these types of crises, including large-scale disasters, require much different leadership skills than those used in their day-to-day operations (Ludwig, 2012, p.1). Ludwig

(2012) stated that “not only do EMS managers have to lead people under normal every day conditions, but they also may be asked to show their leadership during high-intensity events, such as tornadoes or mass-casualty incidents“ (p. 1).

Implications of inadequate response infrastructure.

The fast-track method of Swedish EMS is a possible solution to the problem of an ambulance in the U.S. being turned away from an Emergency Department (ED) every minute as reported by Berger and McKenna (2007). This fact, coupled with increased ED wait times, allowed Berger and McKenna (2007) to state that “no one believes the EDs in any US metro areas are prepared for the crush of a significant terrorist attack, a natural disaster, or a pandemic, such as avian influenza” (p. 55). This statement made by Berger and McKenna (2007) supported Catlett et al.’s (2011) discussion on the long-standing role of EMS leadership in disaster planning that requires knowing, at a minimum, the local hospital systems to ensure knowledge of available care options. This remains a problem that future leaders of EMS in many nations will have to address.

Morton and Vu (2011) made the statement that, “International Emergency Systems development is yet another vibrant and growing field within the specialty of International Emergency Medicine. Many nations have minimal to no Emergency Medical Services (EMS) to stabilize or transport ill patients in the out-of-hospital-setting” (p. 521). The need for a clearer understanding of leadership in EMS is not limited to the economics of emergency response, but remained strongly connected to the test of disaster striking any country or region of the world. This is a test with failing results several times over. While the need for

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

increased understanding and recognition of increased roles for EMS leadership during emergency and organizational change was well discussed and supported, there remained a gap in understanding how leadership is learned in EMS at any stage. Therefore, there was the need for research in this domain of leadership within the EMS profession from an international level.

Global socio-economic infrastructure implications.

A study was conducted by Nielsen et al. (2012) to better understand the current status of pre-hospital care in Low- and Middle-Income Countries (LMICs), which were seeing an increase in injuries and other medical emergencies.

Nielsen et al. (2012) conducted a survey of EMS leaders in 13 LMICs in Africa, Asia, and Latin America. A standardized 32-question survey derived from World Health Organization needs-assessment form asked questions to address:

- methods of transport to the hospital;
- training and certification of EMS providers;
- organizations and the funding of EMS systems;
- public access to pre-hospital care; and
- barriers to EMS development (Nielsen et al., 2012, p. 381 - 382).

Nielsen et al. (2012) used the 2008 World Bank Classification of the countries surveyed and broke the thirteen countries into three groups: low-income, lower-middle-income, and upper-middle-income. Low-income countries surveyed were Ghana, Kenya, Pakistan, and Vietnam (Nielsen et al., 2012, p.383). Lower-middle-income countries surveyed were Ecuador, India, and Sri Lanka (Nielsen et al., 2012, p.383). Upper-middle-income countries surveyed

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

were Brazil, Colombia, Mexico, Panama, Peru, and South Africa (Nielsen et al., 2012, p.383).

Nielsen et al. (2012) reported a 36% response for inadequate funding as being the barrier to EMS development. Lack of leadership within the system was cited as the second most significant finding with an 18% response rate. Other cited barriers to improving EMS coverage were:

- a lack of integration of different services,
- a lack of standards, and
- a lack of leadership.

This last barrier cut across the different systems and institutional arrangements (Nielsen et al, 2012, p. 388). The Nielsen et al. (2012) results were strongly related to Aitken et al.'s (2012) study that found unanimous support for a clear command structure and are similar to Catlett et al.'s (2011) discussion on the need for Mutual Aid Agreements (MAAs) to integrate the different services.

The studies discussed thus far all support Bring et al. (2012) who discussed the importance of research in pre-hospital care, especially ambulance care, as being of great interest. Bring et al. (2012) supported the importance of research in EMS due to the increasing number of graduating ambulance personal and the need to evaluate their work from different angles (p 77). The U.S. NHTSA (2010) stressed this point as well when introducing the *National EMS Scope of Practice Model* in which the following statement was made: “[s]tatistical analysis and research on patient safety, scope of practice and EMS

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

personnel competency must become a priority among the leadership of national associations, Federal agencies, and research institutes” (p. 8). The U.S. NHTSA (2010) went on to assert that later versions of the *National EMS Scope of Practice Model* should be guided by published and replicated scientific conclusions based on EMS data and analysis.

The Demand for Leadership in EMS: A Compelling Need for Change

A compelling need for further participation and role expansion of EMS leadership in both community and federal efforts in processes where EMS leadership has been included since the beginning profession was made by Catlett et al. (2011) in the *Role of Emergency Medical Services in Disaster Response: Resource Document for the National Association of EMS Physicians Position Statement*. Lester and Krejci (2007) wrote that “localized decision-making is vital in an emergency situation” (p. 87) in an article examining National Incident Management System (NIMS), Federalism and Leadership in the wake of Hurricane Katrina. EMS leaders are recognized to have a strong history of leadership in disaster management, preparedness planning, coordinating communications, performing triage, patient transport and care, resource management, and hazardous material response (Catlett et al. 2011, p.420).

The contention for EMS leaders providing leadership in establishing advance Memoranda of Understanding (MOUs), or Mutual Aid Agreements (MAAs) with other EMS organizations in pre-planning for emergencies was made by Catlett et al. (2011). Mutual Aid Agreements demonstrate a commitment to mutual responses, but would also allow collaboration to occur between EMS

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

leadership from different organizations. Catlett et al. (2011) considered these Mutual Aid Agreements (MAA) as a proactive opportunity for EMS leadership to participate in the planning phase of responses that go across jurisdictional lines.

Crossing jurisdictional lines raise issues of licensure and malpractice concerns for EMS leadership that need to be addressed. Not only would discussions on MAAs provide opportunities for EMS leadership to advocate for the safety and protection of their personnel responding to the front lines, MAAs would provide proactive opportunities to discuss and answer financial and legal questions about what happens when a responder is injured when responding to another jurisdiction. These discussions on safety and protection by EMS leadership need to include issues related to compensation, benefits, and protection to safeguard the welfare of EMS responder's dependents in the event of an injury, permanent disability, or even death during a response (Liong, A & Liong, S, 2010).

Any active incident that requires medical services should involve EMS leaders within the incident command structure (Catlett et al., 2011), and therefore EMS responders who respond to the front lines of disasters may initially be placed in leadership roles during the beginning stages of disaster response as command staff. This allows for a Unified Command (UC) structure to be developed and creates the role for EMS leadership to implement emergency medical response objectives and strategies for providing medical care to victims. Thus, EMS leadership need to have knowledge and authority to make critical

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 2

decisions regarding pre-hospital care and have an extensive understanding of the available healthcare systems and patient resources (Catlett et al., 2011).

This discussion from Aitken et al. (2012) is similar to Catlett et al. (2011) that focused on the U.S. Catlett et al. (2011) discussed Unified Command (UC) that were part of the Incident Command System (ICS) created by the National Incident Management System (NIMS). ICS has become an accepted standard for disaster response for many countries (Aitken et al., 2012). Therefore, the unanimous support for a clear command structure found in the Aitken et al. (2012) study must be given strong consideration. As Aitken et al. (2012) discussed, leadership was essential to disaster response, but was generally a learned skill with no set of characteristics guaranteeing good leadership in situations of extreme adversity that required Incident Commanders (IC) or Unified Command (UC) to make decisions quickly based on incomplete or uncertain data and information.

EMS: An expert culture of colleagues.

A discussion focused on the need for studies to be performed on the topic of group supervision in the EMS context is presented by Brink et al. (2012). Brink et al. (2012) described EMS as having a pronounced sense of collegiality and genuine team spirit amongst ambulance personnel that has both advantages and disadvantages. Brink et al. (2012) analyzed the Swedish model of EMS and the increase in the requirements of Swedish ambulances to have a registered nurse in each vehicle to ensure medication management. Brink et al. (2012) reported this as being an effort to support the fast track method of transporting the patient

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

from the field to the proper treating hospital unit. This method affected the routine of the whole ambulance service by allowing the patient to be assessed and transported directly to the treating unit and not to the Emergency Department (ED) doctor (Brink et al., 2012).

The traditional hierarchy found in military leadership was examined by Gienapp (2005), along with the seven core military leadership values of loyalty, duty, respect, selfless service, honor, integrity, and perseverance (LDRSHIP). Gienapp (2005) analyzed if these seven core values could work for EMS. Gienapp (2005) started the analysis with a discussion on the misconceptions of military leadership. He described the misconception of military leaders as being dominating, opinionated, demanding of obedience, and well-groomed leaders with abrupt personalities who demanded respect and were quick to lash out because lives were stake. Gienapp (2005) stated that the basic misconceptions of military leadership could not be further from the truth. Powers (2005) discussed the basic misconception that military leadership was a leadership style that "... demands absolute, unrelenting subservience to the commands of one's superior, that leadership is best done harshly, and that there is no room for error" (p. 54).

Gienapp (2005) discussed loyalty as taking ownership of those around you and supporting them in their efforts and not as blind subservience. Under this definition, loyalty meant getting behind and defending employees, even when they are wrong. Gienapp (2005) stressed that as a leader, your crewmembers needed to know your goal was to help them be the best they can be. This

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

perspective was in agreement between Gienapp (2005) and Powers (2006) who described transformational leadership as both recognizing and supporting personal growth.

At the heart of military leadership is a guiding principle of it being all about taking care of soldiers, and this principle should be applied to all decision making in EMS (Gienapp, 2005). Gienapp (2005) applied this principle to EMS leadership and the duty to uphold provisions of focusing on patient care.

Gienapp (2005) went on to describe EMS leaders as serving in positions where they were trusted with information, policy enforcement, and decision-making.

Gienapp (2005), similar to Powers (2006), stressed the importance to balance all of these points of trust in a way that administration and crewmembers can rely upon with their leadership.

Respect is the key value that is too often forgotten, as discussed by Gienapp (2005). Gienapp (2005) further discussed how the leader who fails at the value of respect is one who misunderstands military leadership. Leaders must recognize the abilities, education, and experience of those who they lead (Gienapp, 2005 & Powers, 2006). In addition to respecting the abilities of others, leaders must be concerned for the welfare of crews. This may include sacrificing a leader's own self-interest. Gienapp described this leadership value as selfless service (2005).

Self-evaluation and being proud of the way you treat your employees are at the core of the value of honor (Gienapp, 2005). Self-evaluation overlaps with the core value of integrity and remaining true to the selfless dedication to your

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

employees regardless of personal differences (Gienapp, 2005). Remaining steadfast in the way you lead regardless of differences and commitment to organizational change are at the core of the value of perseverance (Gienapp, 2005).

Gienapp (2005) supported the use of military leadership in EMS, but warned not to confuse military leadership with militant leadership. Lester and Krejci (2007) supported military leadership in EMS as well for several reasons. Lester and Krejci (2007) supported military leadership because leadership is stressed at all levels of the military, including from the top down to the individual level. Military leadership is a style of leadership that trains with leadership involvement in the conceptual design of training for emergency response (Lester & Krejci, 2007). This allows for in the absence of leadership, the lower levels of soldiers act in accordance with the mission (Lester & Krejci, 2007).

This model of leadership stresses the ability to understand and execute the mission even when command is cut off and quick decisions need to be made (Lester & Krejci, 2007). This model would support the discussion made by Carlett et al. (2011) on the importance of leadership development in EMS since initial responders may find themselves filling the initial roles of leadership within a UC. Military leadership has a guiding principle of making decisions that take care of troops established for all soldiers who may find themselves in leadership roles, and the military trains for this (Lester & Krejci, 2007; Gienapp, 2005). Therefore, military leadership is learned through understanding guiding principles, consistent/predictable actions, and through active field training.

Field leadership requirements.

Former New York City Mayor Rudolph Giuliani's leadership during September 11, 2001 is viewed as an example for EMS leadership because of his management of September 11, 2001, when Giuliani "became the face of reassurance on television for the American people" (p.2) while President Bush was not seen (Ludwig, 2012). Ludwig (2012) cited Giuliani as being known for routinely showing up at emergency scenes in New York City. For these reasons, Ludwig (2012) shared Giuliani's four steps to crisis management:

- be visible,
- be composed,
- be vocal, and
- be resilient.

A belief that EMS leaders must keep these steps in mind, as there is the ongoing need to display everyday leadership skills with those emergency circumstances where one must display true leadership skills in time of crisis is shared by Ludwig (2012). Foster, Goertzen, Nollette C, and Nollette P (2011) used the same example of former Mayor Giuliani to stress the importance of vision in leadership, planning, and addressing the emotional and physiological aspects of leadership such as stress.

Cotter (2005) suggested that common character flaws of failed leaders are defensiveness, emotional instability, poor interpersonal skills, and weak technical and cognitive skills (p. 111).

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

Cotter (2005) provided ten mistakes that guarantee failure for EMS leaders:

- a. Failing to stay abreast of developments in the field and limiting yourself to your own specialty area
- b. Refusing to seek higher responsibility or to take responsibility for your own actions
- c. Failing to make sure that assignments are understood, supervised, and accomplished
- d. Refusing to assess your own performance and abilities realistically
- e. Using your position for personal gain, or failing to tell the truth
- f. Not setting a positive personal example for subordinates
- g. Trying to be liked rather than respected
- h. Emphasizing rules rather than skill
- i. Failing to keep criticism constructive, and
- j. Not attending to employee gripes and complaints.

In addition to the list of character flaws and the list of mistakes that guarantee failure in EMS leadership, Cotter (2005) also provided what can be summarized as the negations of transformative leadership (Powers, 2006), military leadership (Gienapp, 2005), mentoring programs (Williams, 2002), and the discussion of everyday leadership by Porter (2004).

Categories of field leadership.

At the National EMS Management Association's Leadership Competencies forum held in Las Vegas in late 2010 a group of EMS stakeholders agreed on three levels of leadership in EMS services (Hagen, 2011). These three levels are described as "Supervising EMS officer, Managing EMS officer and Executive EMS officer" (Hagen, 2011, p.36). Hagen (2011) constructed an argument that certain leadership skills must become more sophisticated as one advances through the levels of being an EMS officer. Hagen (2011) gave a simple example of this by describing how an executive EMS officer needs to have a strong ability to speak publically, compared to how all EMS employees need to be able to effectively communicate orally when interacting with their patients, other agencies, etc. Hagen (2011) constructed an argument that highlights the various roles EMS leaders may find themselves performing as they advance to different levels of management throughout their career. However, there was not a widely accepted, nor clear consensus in the EMS literature to support the skills progression argument presented by Hagen (2011). Hagen (2011) constructed the rest of his argument that some leadership competencies and skills, such as clinical medicine and scene management, may become less important as the leader advances from field to administrative functions. The literature supported a more dynamic understanding of leadership in EMS at all levels.

EMS Leadership versus EMS Management

Hagen published an article in 2012 discussing lessons from history, and discussed how EMS organizations are as diverse and change-averse as the U.S. itself. Hagen (2012) noted the differences in economic and political changes across the country that EMS leaders struggle to lead and manage their organizations to overcome. Hagen (2012) specifically discussed how leadership styles across the EMS profession also vary significantly. This discussion from Hagen (2012) did not complement Hagen's (2011) previous argument of increasing and decreasing skills and leadership competencies based on three levels of EMS leadership.

Regardless, Hagen (2012) discussed the need for EMS professionals to move from management to leadership to accomplish goals with and through people. This discussion was also found with Ludwig (2012) who reminded EMS leaders, "... that we manage things and we lead people" (p. 1). Ludwig (2012) alluded to things as being "budgets, inventory, and fleets" (p.1). This raised another interesting correlation between Ludwig and Hagen. Hagen (2011) wrote that, "all EMS employees should have a basic understanding of EMS budget and finance" (p.36). Similarly, Evans & Dyar (2010) described leadership as being "the process of guiding others toward accomplishing goals" and compared this to management as "the rational assessment of a situation; the development of goals and strategies; and the design, organization, direction, and control of the activities required to attain the goals" (p. 60). This began to identify differences

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

between EMS managers, who manage things, and EMS leaders, who lead people through daily routines and crises.

Foster et al. (2011) wrote how there can be similar essential qualities and roles for both EMS leaders and EMS managers, and it is important to clearly define these two distinct and different roles. Foster et al. (2011) compared and contrasted these two roles as managers being focused on maintaining day-to-day EMS operations, whereas leaders are more visionary. Foster et al. (2011) described EMS leaders as seeing the big picture beyond processes and are individuals who take responsibility for developing their followers and helping them to reach their fullest potential. Foster et al. (2011) described one way in which EMS leaders achieve this is through developing a positive dynamic environment that can create change.

Similar to Foster et al. (2011), Evans and Dyar (2010) described leadership as involving vision, motivation, and empathy (p. 60). Evans and Dyar (2010) compared leadership to management, which they describe as being more detached and analytical (p. 60). Foster et al. (2011) focused on leadership in EMS but did not minimize the importance of an EMS manager because a good EMS manager must handle responsibilities of task, time process control, personnel, assignments and many other duties that require oversight (p. 6 – 7). This requires an EMS manager to be an excellent manager both on and off the emergent scene (Foster et al., 2011). This contrast of an EMS Leader and EMS Manager, though brief, made by Foster et al. (2011) and Evans and Dyar (2010) did begin to describe the two different EMS roles: leader and manager.

Failures of leadership: missed opportunities.

EMS agencies have been missing out on grants because the language used placed EMS into the same category as hospitals is a problem discussed by Garza (2009). The problem that “hospitals have the people who know where to look for grants and how to write the application that fits the grant” before EMS leaders are even aware of the grant that should be designated just for them (Garza, 2009, pp. 82 – 83). Garza (2009) identified federal leadership roles for EMS leaders in the Department of Homeland Security (DHS) in addition as a problem of EMS access to grants because of grant language. Garza (2009) provided examples of challenges faced by EMS leaders in rapidly changing economic and political environments.

Failures of leadership: indecision.

EMS leaders often make split-second judgment calls based on initial information received before having the complete picture, and the difficulties EMS leaders face because of this is discussed by Ludwig (2010). Ludwig (2010) provided a supporting example of having an EMS provider in your office wanting an immediate answer and finding yourself making an emotional decision. Lester and Krejci (2007) discussed this challenge of decision-making faced by EMS leaders with their analysis of two styles of leadership, transformative and military. Lester and Krejci (2007) focused on National Incident Management System (NIMS) in their discussion, but stated “solid leadership, and most effectively transformative leadership, must be exercised by those at the top levels of state and national government in order to develop truly coordinated responses and

decision making” (p. 87). As discussed, EMS professionals are finding themselves in leadership roles and providing expertise on emergency response in all levels of the government.

Failures of leadership: embracing the need for culture change.

Lester and Krejci (2007) focused on NIMS and federalism, but Powers (2006) focused on organizational change by transformative leadership at a smaller level in EMS. Powers (2006) wrote how EMS professionals must become leaders who employ their visions to transform their employees from feeling powerless into self-actualized and empowered team members (p. 74). Powers (2006) described this as transformational leadership, and the need for transformational leaders to transform EMS.

EMS managers typically rely on a rigid and hierarchal structure that tightly controls employees through rewards and punishments (Powers, 2006). Powers (2006) characterized this leadership structure as being over-managed and under-led resulting in high turnover rates and dissatisfied employees. These undesirable results signaled a failure of the current approach to leadership and the need for a better method for leadership in the field of EMS. Evans and Dyar (2010) stated, “Leaders must let vision, strategies, goals, and values be guideposts for action and behavior rather than attempting to control others” (p. 61).

Powers (2006) argued EMS organizations should consider hiring transformational leaders because it will encourage employee contributions through a system of trust and empowerment. Employees who believe they

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

contribute to their organizations are satisfied and remain with their jobs and this is in the agency's long-term best interests (Powers, 2009). Powers (2009) contended that EMS employees want to contribute to their agency and make their work environment more enjoyable and effective by sharing their ideas and using their talents. Likewise, Alexander, Weiss, Braude, Ernst, and Fullerton-Gleason (2008) wrote how efforts should be made towards retaining highly educated paramedics and one way of doing so is for employers to increase employees' perceptions of organizational justice and perceived organizational support (p. 835-836). Powers (2006) described this as power with others and not to others. Power with others is about creating an opportunity to contribute for those micromanaged people who have been beaten down by an environment that fosters a feeling of powerlessness and a sense of being undervalued (Powers, 2006).

At the heart of the environment created by transformational leadership is trust. Powers (2006) wrote on how trust is mandatory and the transformational leader must have a genuine concern for fair actions and treatment of all employees. In addition to interactions with employees, the transformational leader needs to provide opportunities and encourage employees to attend seminars and conferences as a sign of support for personal and professional growth within the organization.

Powers (2006) recognized probable resistance to this change in organizational environment and leadership style in EMS. Foster et al. (2011) attributed this resistance to change in EMS to tradition. Foster et al. (2011)

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

further claimed that change can be difficult and often pushes one outside of their comfort zone. Powers (2006) wrote that transformational leaders should approach each resistant person with openness and trust. Transformational EMS leaders should allow for resistance and listen to all employees who express their concerns about the change as a means for creating shared governance of their EMS workplace. Powers (2006) reaffirmed that power in EMS must be shared by leaders and providers, because EMS professionals are a talented group often constrained by traditional hierarchy that fosters semi-autonomous work units.

Similar to Gienapp's LDRSHIP anagram, Foster et al. (2011) created the acronym "I CARE" for: Integrity, Compassion, Accountability, Respect, and Empathy (p. 162). Foster et al. (2011) provided insight into each of these values or words.

Integrity is a deeply ingrained virtue into one's character of being one or being whole, and is about having a sense of one's own basic commitments and sticking to and up for them (Foster et al, 2011).

Compassion is a virtue that combines sympathy for another person with a desire to help, which is foundational action for EMS (Foster et al., 2011).

Accountability means being responsible for one's actions, to accept judgment and omissions in whole or in part. This included striving to reach ethical and professional standards set for him or herself (Foster et al., 2011).

Respect is an ethical value that may not always be easy especially in situations in which command and control, however it is required most of the time (Foster et al., 2011).

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

Empathy is trying to imagine what someone else is feeling or sharing those emotions and is essential in EMS (Foster et al., 2011).

The Status of EMS Leadership Development

The absence of clear leadership training standards in EMS.

Miller (2013) wrote on the complexity of EMS personnel functioning in complex teams, but suggests that there is little to no formal training on group dynamics, communication, and effective leadership provided to EMS students. Miller (2013) stated how leadership skills are a necessity for the EMS profession and criticizes the National Emergency Medical Services Education Standards: Paramedic Instructional Guidelines as being “an outline of nearly four-hundred pages that dedicates one-half page to leadership” (p.19).

The U.S. National Highway Traffic Safety Administration (NHTSA) (2004) released the *National EMS Core Content*, which “describes what EMS providers must know and how they practice” (p. 7). This document outlined the basics of EMS education by providing the required content to cover during training and psychomotor skills to learn, practice, and demonstrate. The NHTSA *National EMS Core Content (2004)* included Other Components of the Practice of EMS (p. 36), that lists Leadership (leading, directing, and mentoring) under Professionalism (p. 38). Beyond this one line, *leadership* is not found anywhere else in the *Core Content of EMS Education* (NHTSA, 2004).

A similar document titled *Paramedic Curriculum Guidance & Competence Framework* was released by the College of Paramedics: British Paramedic Association in January 2008. This document was prepared for both Further and

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

Higher Education Institutions (FE/HEIs) in partnership with ambulance service providers to plan the delivery of the education curricula for the profession (College of Paramedics: British Paramedic Association, 2008, p. 3). This document discussed comprehensive Paramedic study in content sections. Some of the content sections mention or address the relevance of leadership:

- 9.6 Health, Politics and Social Health Policy (p.50);
- 9.7 Ethics and Law for Practice (p.50);
- 9.8 Communication and Interpersonal Skills (p.51);
- 9.11 Management of Self and Others Utilising Reflective Practice (p. 53);
- 9.12 Evidence and Research Based Practice (p.53); and
- 9.13 Information Technology, Numeracy, and Literacy (p.54) (College of Paramedics: British Paramedic Association, 2008).

These content sections aimed to provide Paramedics with a broader understanding of how to operate and lead in the various environments in which they may find themselves working. These two educational documents recognized a need for teaching leadership in the education and training of EMS providers based on the various leadership roles required of EMS providers during emergency medical care and response. Unfortunately, and just like the NHTSA (2004), there was no clear description of what EMS leadership skills are or what leadership qualities are needed to be a leader in EMS.

The unique leadership challenges found in crisis management have been recognized by the U.S. Department of Homeland Security (DHS) who called for

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

funding through the Science and Technology division to target the development of Centers of Excellence in universities to conduct multidisciplinary research to enhance our ability to preplan, respond, and recover from terrorist attacks (Green & Kolesar, 2004). Garza (2009) reported that the DHS's Office of Health Affairs (OHA) has recruited high-level and high-visibility EMS professionals for leadership positions. Garza (2009) discussed how these EMS leaders have been tasked with two primary responsibilities: to increase DHS support of the EMS community nation wide and to provide consistent oversight and standardized education credentialing and protocols for EMS professionals employed by DHS agencies.

The next logical step in teaching leadership is to identify stakeholders, and lists core stakeholders as being patients, students, employers, programs and educators, the healthcare team, and regulatory offices (Miller, 2013). DHS would be an example of a stakeholder with defined EMS leadership needs and would have distinct input for EMS training programs. Miller (2013) contended that “[l]eadership skills may be learned, and taught, and improved and therefore should have a more prominent emphasis in emergency medical services education programs” (p.20).

The role of medical simulation in developing technical and non-technical skills during paramedic education is discussed by von Wyl, Zuercher, Amsler, Walter, and Ummenhofer (2009). von Wyle et al. (2009) listed non-technical skills as being leadership, communication, situation awareness, and interpersonal exchange; all of which are crucial to facilitate achievable results

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

during critical situations (p. 121). von Wyle et al. (2009) conducted a study to test the reliability tool for observational assessment of technical skills and non-technical skills and found the instrument to be sufficient with one trained rater and excellent with two raters and a significant positive correlation between technical and non-technical skills.

These findings by von Wyle et al. (2009) supported Miller's (2013) stance on the importance of EMS education programs engaging in leadership training and assessment. Miller (2013) discussed how EMS programs need not to go through complete changes, but to take advantage of existing successful models and develop strategies for engaging in developing highly successful EMS teams and ensuring vital frequent assessment and feedback on leadership performance of leaders and followers.

Professional development: the importance of actions first.

Williams (2002) discussed the need for effective mentoring programs as an essential way to train future leaders, as they are the organization's future. Mentoring is important from a professional standpoint because all professionals have a duty to share their wisdom, their purpose, and their passion with the next generation (Foster et al., 2011, p. 8).

Informal and formal mentoring are two styles discussed by Williams (2002). The most common form of mentoring in EMS is informal, occurring in situations that start as a friendly connection between an employee and a manager (Williams, 2002). Williams (2002) discussed that the inherent problem with informal mentoring is the tendency to mentor only the employees who are

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 2

like the mentor and not reaching out to employees who are different from them. This creates the potential for learning from leadership to be both unrecognized and unnoticed for both other employees and the organization.

EMS organizations have begun realizing the short- and long-term benefits of mentoring, but do recognize the less conducive drawbacks of informal mentoring (Williams, 2002). To promote employee growth EMS organizations have been exploring formal mentoring programs that allow mentoring processes to be planned and have clearly defined objectives (Williams, 2002). The defined purpose of formal mentoring can be linked to organizational goals, as well as, to the professional goals of an employee, increasing the potential to produce more impressive results (Williams, 2002).

Similarly, Foster et al. (2011) summarized vision as being the foundation for mentoring, “because it is through true vision that a person sees the world not as what it is but what I can be” (p. 8). Foster et al. (2011) wrote on how vision allows people to realize mistakes and missed opportunities as they mentor the next generation to do better. This process of mentoring can span a lifetime or a moment. It is important that leaders always strive to help others grow and fulfill their potential (Foster et al., 2011).

Porter (2004) discussed leadership traits found in everyday EMS settings and how these traits need to be considered if an EMS organization favors mentoring as the method for developing leadership. Porter (2004) discussed attitude as being the basis upon which all other traits are built, and this is best defined by how one treats others. This is similar to the analysis of actions with

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

the value of integrity in military leadership made by Gienapp (2005) and Powers (2006) discussion on transformational leadership of empowering others. Thus, a theme on the importance of action within EMS leadership emerged with great importance. EMS professionals influence others every day by their actions, and leaders' actions and their affect on an organization are the basis for how they are remembered (Porter, 2004). Porter (2004) stressed how the action a leader takes as being the single most measureable conduct of his or her leadership and how well the leader evolved his communication and knowledge skills.

Knowledge as being more than education and training but being the sum of what one can know, be, and do and highlights how this applies to EMS leadership serving in many different roles (Porter, 2004). In 2008, Alexander et al. stressed the importance of a more highly educated paramedic workforce, as higher levels of education lead to greater career opportunities. Knowledgeable paramedics are necessary for the EMS profession to meet the changing health care system and to continue growth within the profession (Alexander et al., 2008).

Current evolution of leadership.

An interview conducted by Barbishanksy (2002) asked four up-and-coming EMS leaders to characterize where EMS leadership is and where it is heading. Three of the four participants were male, all worked in the U.S., and all held graduate degrees. Barbishanksy (2002) asked each participant the following questions:

1. What is your biggest career accomplishment to date?

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

2. If you could change one thing in your travels up the EMS career ladder, what would it be?
3. What is your philosophy on EMS leadership?
4. Was there a particular person in your career that you considered a “mentor”? How did that person assist you?
5. In regard to college- and graduate-level education, what are your thoughts on the various fields of study available to students?
6. What are the future trends in EMS?
7. What are the qualities you look for in future EMS leaders?
8. What advice do you have for other up-and-coming EMS leaders?

Complete answers to these questions given by each respondent was included in the article, but Barbishanksy (2002) only provided a few paragraphs of analysis in the concluding section.

All respondents spoke highly of their career accomplishments and how this helped to shape their careers in EMS. As for their travels up the ladder, each respondent had various answers. One respondent spoke about not being in the field taking care of patients as much as they would have liked before advancing up the ladder. Another wanted more background diversity and to have been more exposed to the fire department. Another spoke about the time it took to obtain his masters and the several jobs he had, and the last respondent had a similar answer about moving to several states and holding several jobs.

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 2

All participants agreed on a philosophy of leadership focused on caring for people, communities, and the style of leadership that works for them. Similarly, all had a mentor who helped to guide or shape them as EMS providers and leaders. The mentors were either a partner they worked with or an educator. In regard to education, all spoke highly for the need of graduate education and gave advice on degrees to seek out as it pertains to personal professional goals. The respondents stressed the importance of education in EMS because of the future trends of EMS. They all predicted a more complex, diverse, and expanded role for EMS in the future. This will require a strong work ethic and diversity in ability for future EMS leaders, but there was also an importance placed on practical experience in addition to the intelligence and academic requirements for the future EMS leaders.

Rationale for this Study

This literature review by its incomplete articulation of what leadership training is needed to prepare EMS for the uncertain future the field faces further demonstrated both the need for and the significance of this study to reveal what leadership skills are required in the international context. In addition, void in educational requirements characterized in this literature review justified the research question of this study. The fact that leadership roles are present in the EMS profession is known. It is also known that these roles are evolving and growing as the complexity of the emergencies escalates. For example, one area of growth for EMS leadership is in disaster response. However, one common criticism of EMS leadership has been with disasters response, has been a point

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 2

of failure for several leaders. These failed responses in leadership, including disaster response in the richest and the poorest countries point to both the urgency and compelling need to answer the crisis in leadership. Likewise, there are criticisms on the lack of leadership education and leadership evaluation in EMS education.

Regardless of the criticisms, EMS leadership and professional knowledge is recognized as an important element of the pre-planning, operational, and post-response phases of disaster response. The roles of EMS leadership are dynamic, collaborative, and are being encouraged to expand as more professionals and levels of government recognize the value of strong EMS leadership. This will lead to EMS agencies facing organizational challenges and will require current and future leaders to address these challenges.

The style of or characteristics of leadership that need to be embodied by EMS leaders were discussed. It was well accepted that leadership in EMS is unique because EMS must quickly adapt to a wide spectrum of emergencies and responses. There are common types of leaderships for EMS being discussed and the benefits of mentoring programs. Those who hold graduate degrees, and do not include a voice for actual EMS field providers, led these discussions. One article provided an opportunity for four U.S. EMS leaders to discuss the importance of leadership, mentoring, and education in EMS, but provided limited analysis. These articles do have strong similarities, specifically the actions of a leader; however, a strong cohesive bond could not be established between the articles to truly satisfy the research questions of this study.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 2

The recent literature found during this review supported the need for further understanding of how leadership in EMS from a multi-national perspective was needed. The literature reviewed for this study revealed the limitations of the body of knowledge on how leadership was learned, developed, and viewed in the EMS profession. This qualitative study aimed to provide a cohesive understanding of how leadership was internationally learned in EMS from EMS providers with multinational experiences.

This study interviewed EMS providers who fit the criteria to describe how leadership was learned when they were students, throughout their careers, and to ascertain their advice and counsel for the future leadership development for EMS providers. Chapter 3 outlines the qualitative methodology and approach used to fulfill the significant need for this study as well as how the research questions were addressed.

Chapter 3 – Research Methodology

Introduction

The design, sampling, and data collection procedures of this research study are discussed in this chapter. A qualitative research methodology was used for this study to achieve the purpose of the study to interview EMS providers from multiple nations currently working in Riyadh, Kingdom of Saudi Arabia. A phenomenological qualitative methodology was applied to answer the central question of how leadership was internationally learned in EMS. The research design and interview questions set out to discover how those interviewed learned leadership as a student, throughout their career, and what future EMS leaders need to be taught. Chapter 4 includes the discussion on data analysis and validation of the findings.

Ethical Considerations

The researcher contacted EMS systems in Riyadh, Kingdom of Saudi Arabia with an overview of this study and asked to contact EMS providers who met the study requirements. The contact information of those willing to participate in the study was forwarded to the researcher. The researcher contacted the EMS providers to confirm their willingness to be part of the study and to schedule the interview.

Creighton University IRB approval (#13-16759) was received on Wednesday, May 29th, 2013. EMS providers interviewed were not students or employees of the researcher. All EMS providers interviewed were over nineteen

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 3

years of age and able to provide both verbal and written consent. Those interviewed did so free of coercion, financial benefit, or personal gain. The interviews conducted were considered low risk to the participants. Interviews were conducted at a time when the participant was free of commitments for at least one hour. A written or verbal consent was obtained prior to all interviews.

The informed consent of the participant included that his or her identity be confidential under Creighton University Institutional Review Board (IRB) policies. The Informed Consent document included a means to contact the Creighton IRB and the researcher. The researcher asked permission to record the interview and participants knew when the conversation was being recorded and when it was not. All participants were informed of their right to take a break or to withdraw from the interview at any time. The researcher referred to the participants by the number in which they were interviewed. Participants were informed the researcher would only publish basic demographic information and the transcripts of the interviews would not include identifiable information. In addition, the participants were told the transcripts would be sent to them to assist in identifying any possible errors made in transcription.

Research Design

Creswell (2012) discussed that phenomenological studies describe common meanings for several individuals of their lived experiences. In this study, the shared phenomenon and lived experience was having an international EMS experience as a provider and discovering how those working in Riyadh, Kingdom of Saudi Arabia, learned leadership as an EMS student during their

career. This included what leadership skills participants believed were needed in EMS based on their experiences. Creswell (2012) discussed the phenomenological qualitative methodology approach as collecting data from persons who have experienced the phenomenon to describe what they experienced and how they experienced it. This research methodology was used to interview and further understand how the EMS providers experienced leadership education within EMS and based on these experiences, what is needed for future EMS leaders to learn.

Population and Sample

The purposeful sample for this study was EMS providers working from multiple nations or with international experience was selected from EMS providers working in Riyadh, Kingdom of Saudi Arabia. The World Factbook (2013) estimated over 5 million foreign workers in the Kingdom of Saudi Arabia in all fields of employment, and this population represents an approximate 1/5th of the total population in Saudi Arabia. The Royal Embassy of Saudi Arabia in Washington, DC (2011) released that the Saudi Arabian government has offered scholarships to more than 120,000 students with nearly 50,000 of them studying in the U.S., and declared this as a great opportunity for Saudi students to promote peace and cultural understanding. Therefore, Riyadh, Saudi Arabia was able to provide the purposeful sample of this research because Saudi Arabia has a large population of foreign workers and strongly supports Saudi students to study internationally and return to Saudi Arabia for employment.

The researcher contacted EMS systems in Riyadh, Kingdom of Saudi Arabia with a summary of the study and criteria for selection. The EMS systems were asked to present the summary and criteria for selection to their employees and to ask who would be willing to participate. The list of employees willing to participate was forwarded to researcher. This sample was representative of the population of EMS providers with international experiences.

Sampling Procedures

The population for this study consisted of EMS providers working in Riyadh, Kingdom of Saudi Arabia. Criterion sampling was used to identify EMS providers working in Riyadh, Kingdom of Saudi Arabia that met specific criteria.

The criteria for selection were:

- having successfully completed EMS training or formal education in a country other than the Kingdom of Saudi Arabia;
- were actively working as an EMS provider in Riyadh, Kingdom of Saudi Arabia;
- were comfortable with being asked questions in English and providing responses in English;
- were willing to allow the audio of the interview to be digitally recorded; and
- were willing to participate in the study.

The rationale for selecting the criterion was to meet the purpose sampling of those EMS providers with international experience working in Riyadh, Kingdom of Saudi Arabia. The design of this research involved detailed questions, participants need to be able to communicate in English to allow for the

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 3

researcher who only understood English to analyze the data. Additionally, the criterion was focused on ensuring comfort of the sample in communicating in English for both the researcher and participant. Finally, the participant needed to have a willingness to participate in a recorded interview and the study.

Instrumentation

Appendix A provides the interview protocol. This protocol was reviewed and found free of any bias or question leading by Associate Professor Dr. S. V. Mahadevan, MD, Stanford University, Professor Dr. Khalid Fouda, MD, King Saud University, and Mr. Michael Krtek, BS, King Saud University. Dr. Mahadevan is the Director of Stanford Emergency Medicine International and is the Director of the Fellowship in International Emergency Medicine at Stanford University. Dr. Mahadevan also served as the former Associate Chief of Stanford Division of Emergency Medicine and former Stanford University Emergency Department Medical Director. Dr. Khalid Fouda is the Dean of Prince Sultan College for Emergency Medical Services of King Saud University in Riyadh, Kingdom of Saudi Arabia. In addition, Dr. Khalid is the Editor-in-Chief of Urology Annals. Mr. Michael Krtek is the EMS Program Director for Prince Sultan College for Emergency Medical Services of King Saud University in Riyadh, Kingdom of Saudi Arabia.

The interview consisted of the following ten open-ended questions:

1. Starting with your first day of training, please share with me your education, years of service, experiences, and where your career in EMS has taken you?

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 3

2. Please tell me about your own EMS training with regard to leadership.
Were leadership skills specifically discussed or taught?
3. During your career as an EMS provider, what leadership skills have you learned?
4. How have you learned your leadership skills within the profession of EMS?
5. What would you describe as good examples of leadership in the field of EMS? What would you describe as bad examples of leadership in the field of EMS?
6. How about within your own organization, are there any good leaders?
What roles do these individuals fill?
7. Can you describe what leadership qualities you expect from those you know in EMS?
8. How have your current views on leadership in EMS changed throughout your career?
9. What should EMS training and education programs be teaching about leadership in EMS currently and in the future?
10. From your perspective, what leadership skills do current and future EMS students need to develop in order to be successful as leaders within EMS?

With possible additional and/or follow-on questions for depth and breadth as listed in Appendix A

Data Collection Tools and Procedures

Creighton IRB (# 13-16759) approval was received on Wednesday, May 29, 2013. Dissertation Committee Approval was received on Friday, May 31, 2013. Data collection started on Saturday, June 1, 2013, and was scheduled to end by Monday, July 1, 2013. In May 2013, the researcher contacted EMS organizations and professionals in Riyadh, Kingdom of Saudi Arabia, with a brief overview of the study with a request for assistance in identifying EMS providers who met the selection criteria for this study. Those identified and provided to the investigator were contacted by either phone or e-mail and asked if they would be willing to be part of the study. Those who responded favorably were sent the consent by e-mail and asked to schedule a time to be interviewed.

Prior to each interview the participant signed a written consent form Appendix A. If an interview needed to be done over the telephone or the Internet, the researcher would send all written consent documents to the respondents electronically prior to their interview. In the case of not being in the same physical location as the researcher, Appendix A was sent to the participant and obtained recorded verbal consent before starting of the interview. Fortunately, the researcher was able to conduct all interviews in person.

Chapter 4 – Results and Analysis

Introduction

In this chapter, the findings of the 19 interviews conducted for this qualitative study are reported. This will be done by first discussing the process for how the data were analyzed and validated by the researcher. A summary of the participants will be provided. Four super-ordinate themes were developed from the data and will be presented in the following order:

- (1) How Leadership Was Learned,
- (2) Who is a Leader in EMS,
- (3) Leadership Skills, Qualities and Characteristics of leadership and
- (4) Recommendations for the Future.

Within each super-ordinate theme there are sub-themes that will be discussed as well.

Data Analysis

After the audio-recorded interviews were transcribed by two transcription services, all data were reviewed and a list of themes and patterns developed in the transcripts. Each theme or pattern identified was assigned a code utilizing *NVivo 10* software (QSR International). The interviews were then uploaded to begin digital coding and to begin analysis. Meaningful segments from interview transcripts are included in Chapter 4. The transcripts within this dissertation would have made identification of participants possible, and, consequently, transcripts are available only by contacting the researcher or a relevant faculty

advisor. The researcher reviewed all responses in each interview question transcription. To ensure accuracy and similarity, the researcher sent one interview transcribed by one transcription service to the other and vice versa. The researcher compared the similarity of the interviews transcribed by both services and found minimal inconsistencies.

A final review of all the transcripts was done by the researcher to ensure all identified themes and patterns were consistent with the analysis. The analysis was electronically sent to each participant for review and feedback. A comparison of the literature was made to determine which findings were supported or not supported by the literature presented in Chapter 2 and will be discussed in Chapter 5.

Validating the Findings

Member checking.

To validate the interviews, the researcher rephrased or summarized each answer given by the respondent. In addition, each participant electronically received a transcription copy of his or her interview to identify any errors made during transcription. Upon receiving the copy of the interview transcription, the participants were informed they had seven days to respond and that no response would mean that they agreed with the transcription. One respondent responded with an editing correction of an improper year reference, which was confirmed on the audio and the transcript was edited. Two others reviewed their transcriptions and found the transcripts to be accurate. As the researcher analyzed the data and developed conclusions, he sent the participants the analysis and asked for

feedback. Creswell (2012) described this process of establishing credibility as member checking.

Bracketing.

Creswell (2012) discussed bracketing as the researcher setting aside his or her experience as much as possible. Creswell (2012) who drew from Giorgi (2009) saw bracketing as not letting past experiences and knowledge influence the determination of experiences. Before collecting data, the researcher bracketed personal experiences by documenting a biographical statement and discussing the research questions and how the researcher would personally answer the questions with Dr. William Raynovich, Committee Chair.

Auditor.

Dr. William Raynovich, Committee Chair was provided the participant's contact information, audio files, and other artifacts of the research upon request. Creswell (2012) described this process where an auditor examines whether or not the findings and conclusions are supported by the data. The use of an auditor for this study was to validate the findings and accuracy of the research.

Triangulation.

Triangulation is described by Creswell (2012) as making use of multiple and different sources to provide corroborating evidence. The researcher analyzed additional sources of information or artifacts that are discussed by the participants. Any evidence yielded from this triangulated additional information

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

and provided additional validity to the findings. Artifacts used for triangulation and findings are discussed in this chapter.

Summary of Interviews

The first interview occurred on June 1, 2013, in Riyadh, Kingdom of Saudi Arabia at 11:41 a.m. All interviews were conducted in person and in Riyadh, Kingdom of Saudi Arabia from June 1, 2013 to June 9, 2013. A total of 19 interviews were completed during this time. An additional two interviews were scheduled with a South African male paramedic and a female paramedic from the United Kingdom. The South African male canceled his interview to work overtime and then left Saudi Arabia on vacation. The female paramedic from the United Kingdom canceled her interview for work-related reasons. Each was asked by e-mail to reschedule their interview and was informed the interviews could be conducted over Skype. Neither responded to reschedule their interview. No specific commonalities or pattern can be discerned for why the interview request was declined.

An additional e-mail request was sent to all participants on July 23, 2013. The participants were asked to specify their age range and were asked to respond to this request within seven days. Twelve participants responded to this request and provided their age range while seven participants did not respond to this request.

Appendix B provides a demographic matrix of each of the 19 EMS professionals interviewed. In summary, of the 19 EMS professionals working in Riyadh, Kingdom of Saudi Arabia:

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

- The nationalities represented were American, Saudi Arabian, German, Filipino, and Jordanian.
- The countries they collectively trained in were the United States of America, the Kingdom of Saudi Arabia, Germany, the Philippines, Qatar, Australia, and Canada.
- The countries where they provided EMS care as a working licensed EMS provider were the United States of America, the Kingdom of Saudi Arabia, Germany, the Philippines, and Qatar.
- 13 stated they were paramedics, 1 stated he was an EMT-Intermediate, and 5 stated they were EMTs.
- Based on respondent input, the year in which they entered into the EMS profession occurred between the years of 1975 – 1979 to the years of 2005 – 2009, with the majority of participants entering into the profession between the years of 2000 – 2004.
- 10 of the participants had completed bachelors' degrees, 1 had completed an associates' degree, and 2 had completed masters' degree. 6 did not specify their educational credentials.
- 17 of the participants were males and 2 were females.
- Of the 12 participants who responded with their age group, 7 were between the ages of 25 and 34, 4 were between the ages of 35 and 44, and 1 was between the ages of 45 and 54. The 7 who did not respond were assigned an age range that was estimated by the researcher based on information and dates found in the interview transcription. 3 participants

were estimated to be between 25 and 34 years old, 2 were estimated to be between 35 and 44 years old, and 2 were estimated to be between 45 and 54 years of age.

How Leadership was Learned

The first theme developed from the data was how leadership was learned in EMS from the multinational participants. The data from this study supports that leadership in EMS was learned from mentoring, experience, other professions and courses. Each of these means of learning leadership is discussed in this section. In addition to these means of learning leadership, the data from this study supported that leadership content was not taught in and this too is discussed in detail. Complete detailed findings from the research for this theme are included in Appendix C.

Mentoring.

Many of the participants spoke how they learned leadership in EMS from a mentor. Learning leadership within EMS from mentoring was seen in all levels of certification, education, and is consistent in regards to nations in which the participants either trained and/or worked. Mentors were most often described as a more experienced provider or co-worker, manager, and leader. For example Participant #10 stated he learned leadership in EMS “from seeing these older guys that were there before me, my field training officers when I was brand new. Seeing my partners that have been on the job; seeing how they act and do things.” He went on to state, “most of us learn on-the-job and are often

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

influenced by the person that taught you. When you start in to a new job, they'll say, 'Well, this is the way we do it here, don't worry about the way it was done there.'"

Mentorship was not always from a higher certified provider to an equal or lower certified provider as described by Participant #12 who was an EMT. Participant #12 stated, "That's one of the best things that I've learned, that they showed me, and now I'm showing it to my partner even though he's a paramedic, but he's still new." Mentoring also took on a form of being trained to be a leader's replacement as described in an example by participant #14, "I was actually being trained to take his post, to take his position for six months because he was getting promoted."

Participant #15 discussed how learning leadership could start as early as being an EMS student both in the classroom and during an internship. She described how she learned from her EMT instructor and how she now models her instructor when she teaches, "because I saw the benefit of it in the beginning." Participant #15 also discussed being an EMT student and her internship, "so you really get to see a lot. You learn a lot. Those experiences happen while you're in your training. But, again, remember that I was only required 8 hours of ride time versus my doing as much as I possibly could. A lot of my leadership skills came from watching and observing."

Participant #9 contrasted mentoring experiences he had by stating, "I have been blessed with having some really great mentors, some people who have acted as unofficial field training officers and unofficial management mentors. I

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

have seen some great ones and I have experienced some awful ones unfortunately, but I don't blame the ones who were bad because it is up to the organization. I think it has a certain part to give their managers the specific tools needed to do the job." From his experiences, #9 contended his thought that there should be mentoring programs for people who are going to be managers and compared this process to paramedic education stating,

"You just don't jump in the field and learn to become a paramedic. You gain the knowledge first, the book knowledge, then you gain the practical knowledge, and then you go out to the field. You are supervised by someone, and then you actually do the job. I think that needs to take place as well with practitioners who become managers."

Experience.

Many of the participants described gaining experience through on-the-job training and learning leadership from experiences while in the ambulance or in the field. Experiences included practice and doing research on their own. Participant #14 described coming from a system where "on-the-job training was what they call sink or swim." Participant #14 went on to describe his experience as coming from trial and error rather than formal training.

Similarly, participant #7 described learning from his mistakes and trying to change. Participant #7 rooted his description of learning leadership from experiences to the various EMS related roles he served during his career. Participant #7 also discussed experiences from a family business and lessons learned from that experience that he applied to being an EMS leader through out his career.

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

Participant #1 reflected on his 18 years of service and stated, “Of course, every day is teaching you leadership skills a little bit.” Participant #15 shared her personal opinion “although you can take a lot of classes, and go to conferences, and things that build leadership skills, I think that more than anything else, leadership skills come from experience.” She attributed this to “the more experiences you have where you’re put into a position of having to make a decision, strengthens your leadership skills everyday of your life. In all of us, whether it’s in our professional life or our personal life, raising children and what have you, learn leadership skills.” Learning from experience in the ambulance and field, life or experiences outside of EMS and trial and error is consistent with all attributes of the participants who discussed learning leadership from their experiences.

Other professions.

Participants discussed how they learned leadership within EMS from other professions. The professions discussed were military and government departments, fire departments, police departments, and one participant even discussed a role in business. Participant #7 described how he learned leadership from his experiences of managing and maintaining financial records for a family business and how he applied what he learned to his EMS roles.

Participant #10 described gaining leadership skills and education from working with the U.S. Forestry Service and with FEMA. In both he learned incident command and responded to large fires and hurricanes, including Hurricanes Rita and Gustav. He connected this experience with the Junior

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Reserve Officer Training Corps in high school as learning leadership from other professions.

Participant #16 attributed most his leadership skills as coming from the military. While active duty he went through Airman Leadership School, which he described as being “leadership principals that was about six weeks.” After this, he went through the Non-Commissioned Officer Academy, which was five weeks. Similarly, Participant #19 who started his career as a military EMT stated that the military itself taught him leadership skills.

Some leadership was learned from fire departments, and most attributed this to the structure of a fire department. Participant #1 described fire protocols as being a source of leadership. He described the German DV500 as being a response guide for mass-casualty incidences and viewed this as a form of leadership he learned from the fire department. Both Participant #7 and #9 had fire department experience and each discussed the structure of their departments, and how they were great learning experiences.

Participant #15 described how, within her EMS experiences, there were providers who were crossed-trained between multiple professions: EMS, Fire, and Police. Participant #17 described in the Philippines that cops were a good source of leadership education because they were strict, displayed good professional behavior, and were able to give orders, which were needed to prevent a scene from going downhill.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Courses.

Many of the participants discussed learning leadership skills through courses they took during their EMS education. Several discussed learning leadership skills within the context of disaster management or responding to a disaster. For example, Participant #2 gave the example of when you get a “call for a disaster or like that you need to be leader in that situation. I studied for that subject.” Participant #14 described a similar experience, “I did take a class when I was college, just when I got out of college for initial response to mass casualty, evaluating resources and that stuff.”

While in Australia, Participant #2 stated he had a leadership course. For many, leadership skills were taught within their EMT education coursework. Participant #15 discussed how in her EMT class, “yes leadership skills are discussed and taught because it is in a chapter in the basic EMT class. It kind of falls under the operations and management chapter in the book, and at that point, basically what they teach you is they teach you radio communications and how to communicate with dispatch and the police and the fire and things like that.” She went on to describe the leadership skills she learned in this setting as very basic at best.

Participants discussed gaining leadership skills from simulations within their courses. Participant #1 discussed simulations that presented different scenarios for a team to perform and then, at the end, having the leadership evaluated. He described this as being good practice because it allowed you to learn how you performed and to gain feedback on your leadership skills with

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

valuable debriefing sessions and stated, “You can get a much better possibility to judge these leadership skills in the simulation.”

Similarly, Participant #10 described simulations as being key to new EMS professionals. Participant #15 described her experiences with simulation and how she was able to develop team-building skills as a result of working through scenarios. For Participant #16, she felt the best thing they did for her class in regards of leadership skills was just being thrown into scenarios where one person was in charge. She went on to describe how in these scenarios leadership abilities as a team leader were scored.

Participants discussed EMS management courses as being another course in which they learned their leadership. Participant #3 described his course as being “mainly focused on how to be a good leader and how to manage situations.” Participant #3 also considered his intensive care program that he studied in the U.S. as being a source of leadership education, “I have been forced to be a leader with the team that I worked with. And they brought you under stress in many, many situations like critical care areas to show your leadership, and they will evaluate your leadership at that time.” He also listed his EMS Research Course as being another source of leadership skills, but did not elaborate.

Participant #7 described his sense of formal training leadership in education came from courses focused on teaching. These courses were given from his paramedic instructor, Walt Stoy, who at the time was completing his Master’s degree. Participant #7 remembered his instructor taking it to heart to try

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

to develop people who knew how to teach. Therefore, participant #7 took courses focused on how people learn, what methods of teaching are there, and what is Maslow's hierarchy.

Participant #19 discussed his Masters program for Healthcare Emergency Managers and described this program as learning how to be a "manager in the emergency situation." Participant #19 discussed courses he took on emergency management, and within this coursework, there were topics discussed on "how to achieve the professionalism, how to be proficient as in paramedic and how you deal with colleagues, with other healthcare providers, with your patient."

Within this data were artifacts that could be triangulated. The researcher was unable to locate the DV 500 document as discussed by participant #1. The researcher did triangulate with EMS textbooks used for EMT and Paramedic education and training. There are more than one EMS education textbook, but they all are based on the same educational guidelines discussed in Chapter 2.

A review of the 10th edition American Academy of Orthopedic Surgeons EMT education textbook titled *Emergency Care and Transportation of the Sick and Injured* (Pollak, 2011b) was used as an artifact to triangulate discussions made by participants on specific chapters within their EMT textbook. Chapter 36 titled "Transport Operations" was reviewed and the objectives of the chapter did not discuss leadership and was summarized as being a chapter that covers "knowledge of operational roles and responsibilities to ensure patient, public, and personnel safety" (Pollak, 2011b, p.1330). A similar review was completed for Chapter 37 titled "Vehicle Extraction and Special Rescue," which resulted in an

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

identical chapter summary and objectives that did not discuss leadership (Pollak, 2011, p. 1366).

A review of the revised reprint of *Paramedic Practice Today Above and Beyond* (Aehlert, 2011) was reviewed as an artifact to triangulate discussions made by participants on learning leadership within their paramedic training.

Chapter objectives for each of the following chapters were reviewed: “Paramedic Roles and Responsibilities” (p. 21), “Illness and Injury Prevention” (p. 42), “Legal and Regulatory Issues” (p. 62), “Ethic” (p. 83), “Assessment-Based Management” (p. 614).

With the exception of Chapter 55, “Assessment-Based Management” that noted one objective as explaining the roles of the team leader and the patient care person (Aehlert, 2011, p. 614), none of the other chapters had objectives focused on leadership. Within the chapter the team leader was described as having many roles, including maintaining an overall patient perspective, providing leadership to the team by designating tasks, and coordinating transportation (Aehlert, 2011, p. 619). It is also important to note that Chapter 3 “Illness and Injury Prevention” did not list an objective focused on leadership. It did, however, discuss illness and injury prevention as an essential leadership activity and a responsibility for all EMS professionals (Aehlert, 2011, p. 47).

A review of American Academy of Orthopedic Surgeons text, *Critical Care Transport* (Pollak, 2011a), was conducted on Chapters 1, “Introduction to Critical Care Transport” (p. 2), and Chapter 2, “Medical and Legal Issues” (p. 20) and did not yield any chapter objectives focused on leadership. Likewise, a review of the

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

second edition of *Foundations of Education: An EMS Approach* (National Association of EMS Educators, 2013) was conducted on Chapter 1 “Attributes of Effective Educators” (p. 2), Chapter 2 “EMS Educator Roles” (p. 19), and Chapter 19 “Tools for Field and Clinical Learning” (p. 266) and found that Chapters 1 (p. 2) and 2 (p. 19) did not provide chapter goals that indicated a focus on leadership, however Chapter 19 did.

The goal of Chapter 19 “Tools for Field and Clinical Learning” was to “[e]xplore instructional theory and strategy focusing specifically on clinical education, that is, education that is experiential and involves the student’s observing, participating in, or leading patient care activities in actual hospital or field patient care settings” (National Association of EMS Educators, 2013, p. 266). Within Chapter 19 was a model for teaching team leadership, a model focused on teaching how to organize a team, articulate clear goals, Make Decisions Through Collective Input of Members, Empower Members to Speak up and Challenge, when Appropriate, Actively Promote and Facilitate Good Team Work and Skilled at Conflict Resolution (Cage, 2011, p. 275 – 276).

Participants discussed learning leadership from a course focused on EMS management. A review of the text titled *Management of EMS* (Evans & Dyar, 2010) was conducted and focused on Chapter 2 “Strategic Planning for EMS” (p. 23) and Chapter 3 “Manager to Leader” (p. 49). Chapter 2 “Strategic Planning for EMS” did have objectives focused on developing strategic plans, identifying management tools for conducting project planning and components of EMS

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

budgets, however there were no specific objectives focused on leadership (Evans & Dyar, 2010, 23).

There were objectives focused on leadership found in Chapter 3 “Manager to Leader”. Leadership oriented objectives found were 3.4 *Develop and define leadership activities* and 3.6 *Apply the concept of values to organizational leadership* (Evans & Dyar, 2010, p.49). Within the section focused on leadership discussed by Evans and Dyar (2013) were subsections titled: Commonalities and Differences, Establishing Vision for the Organization Leadership Styles (p. 60 – 63) and Ethics and the Leader (p. 68). In addition, there were other sections that discussed traits or attributes for both leaders and managers and those were listed as: Competency, Communication, Managing E-mail, Communicating with People, Networking, Leadership as an Art, Conflict Resolution, Succession Planning, Mentoring and Coaching (p. 63 – 71). Lastly, there was a section dedicated to discussing Leadership Failures (Evans & Dyar, 2013, p. 72 – 73).

Content that was not taught.

In contrast to learning leadership in courses, many participants discussed how leadership was not taught in their EMS education. Participant #5 stated, “I never took any class about the leadership, unfortunately.” Participant #6 went on to describe his education as only being focused on theory and clinical applications, “we don’t touch leadership too much.” Participant #10 stated in his EMT courses, leadership was not touched on, “We never really necessarily sat down and said, ‘Look this is the leadership qualities. This is what leadership is about.’” Participant #16 did not recall in-depth discussions about leadership

within her paramedic education except for the aspect of being told: “You’re the paramedic. We weren’t given specific leadership courses. We were told step into it.” While reflecting upon her education she shared this: “I think leadership gets thrown just kind of in between the lines so to speak, because it’s something that you’re going to have to learn. We don’t have to teach it right now. You’ll learn that when you’re in the field sort of thing.” Participant #19 went as far to state, “There is nothing more than just the thought” on leadership when reflecting upon his EMS education and training.

Leadership Roles within EMS

The second major theme developed from the data was identification of potential roles within EMS for leaders to serve in. Leadership roles range from EMS dispatchers to higher-level roles within the EMS organization. Included in the range was EMS educators and both EMTs and Paramedics. All of the possible leadership roles in EMS are discussed in this section. Complete detailed findings from the data for this theme are included in Appendix D.

Those interviewed identified leaders’ roles within EMS as instructors, dispatchers, EMTs, paramedics, medical director or physician related to EMS, shift leaders, and administration or management. Leadership roles are not always at the management level as Participant #9 stated: “I have experienced some good leaders within the organization, but they are not necessarily in management.”

Within the field of EMS participants identified both EMTs and paramedics as being able to be in a leadership position. Participant #7 and #8 both

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

discussed how an EMT may not be viewed as a leader because of an EMS system's design and or their lower level of certifications, nonetheless both described EMTs as being capable of serving in leadership roles. Participant #1 believed that "in the field I think most of the paramedics there ... they are good leaders for the teams."

Participant #18 described medical directors or medical supervisors as a leadership role within EMS because, "they should be supervise us for the quality of our work, to bring our rights or something when we interfere with the people, you know some of troubles going on there." He went on to describe part of this leadership role as dealing with complaints. Participant #7 described how physicians related to EMS could also be leaders within a training academy. He described how this role could look out for the best intentions of students and ensure no one was cutting corners in the education and training of EMS professionals. Similarly, Participant #15 described her EMT instructor as being in a leadership role within EMS because she was able to teach a variety of student types and valuable lessons. Participant #15 learned leadership lessons such as patience, which "is a key role, especially in this line of work, where EMS is concerned."

A leadership role within EMS included dispatchers who can assign or manage call volumes. Participant #13 described how a dispatcher could equally dispatch calls to all crews and how he viewed this as leadership. Many of those interviewed discussed shift leaders as being leaders within EMS. Participant #10 described shift supervisors as making "sure everything goes well, fine."

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Participant #12 discussed how there is a team leader designated for each shift. In addition, participants stated that EMS Supervisors, EMS Managers, EMS Operations Managers or Heads of EMS as being leadership roles within EMS. Participant #9 described these roles as being mid-level management, but not at the executive level.

Leadership Skills, Qualities, and Characteristics

Within the data from the research emerged the profile of an EMS leader. The participants shared leadership skills, qualities and characteristics they expected from leaders in EMS. Those leadership skills, qualities and characteristics that had frequency within the data are discussed in this section. Complete detailed findings from the research for this theme are included in Appendix E.

Communicators and listeners.

Many of those interviewed discussed the importance of EMS leaders being able to communicate. Participant #3 discussed how excellent leaders within EMS lead by their communications. Similarly, Participant #15 stated, "They need to have good communication skills. A leader would have good communication skills." The importance of being able to communicate was a skill often learned throughout a career by those interviewed. Participant #6 stated, "Communication is very important. In our classes, it was not too much communication skills we had and we faced, I faced here in our facility a lot of

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

problems coming from communication. Bad communication or lack of communication that makes a lot of trouble.”

Participant #7 discussed that communication skills are needed in leadership roles in administration or in field operations. In both fields, Participant #10 discussed part of communication skills as “not being afraid to speak up if you say something because whether you’ve been on the job one day or 500 years, you might see something that no one wants to see, especially when it relates to crew safety or patient safety.” Interview #15 discussed that with teaching communication skills you teach confidence, “as long as you teach people how to communicate, you’re teaching them how to be confident.”

Participant #18 stated, “If you have good communication skills that you will be able to lead well, because it is important to communicate with your colleagues, hospitals and with patients and their families.” This was another important part of communication discussed by participants - being able to communicate with other departments or professions related to EMS. Participant #6 described leaders as needing to have good communication skills to not only communicate with staff, but with personnel throughout their own facility. Participant #6 also discussed how good EMS leaders need to be able to communicate with other departments such as police and fire, as well as government organizations and hospitals. Participants also discussed the importance of being able to communicate with other healthcare professions related to EMS, most commonly mentioned were Emergency Department nurses and physicians.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

In terms of the concept of communication, many participants discussed the importance of leaders within EMS as being able to listen. Participant #17 discussed the importance of being able to listen in order to know what to change, when to change and how to change. Participant #17 went on to state, “you need to be a good listener from your lower people.” Participant #16 described how people, or employees, go to their EMS leaders when they have questions, comments, or concerns. Participant #11 similarly described EMS leaders need as having, “the willingness to listen to someone’s problem and the knowledge on how to correct it.”

Problem solvers, decision makers, and administrative abilities.

Participant #2 described leaders in EMS as needing to be able to solve problems without making them worse. Participant #14 discussed an expectation of when he takes a problem to management he expects follow through to correct the problem. For other participants they described EMS leaders as being able to listen to problems, deescalate situations and make decisions. Participant #11 wanted leaders in EMS to understand the problem and “attempt to correct it or some sort of resolution or compromise.” He described problem solving or conflict resolution as an opportunity for a leader in EMS to demonstrate effective leadership, “I think that shows at that time that they’re effectively leading and at other times when those criteria not met, they’re not effectively leading.”

Participants discussed the need for collaborating with others to solve problems, and this included bringing individuals together to discuss a problem or conflict. Participant #16 discussed how leaders in EMS may find themselves

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

acting as mediators, but also describes leaders as “someone who can take control of a situation and deescalate a situation.” Similarly, Participant #7 discussed leaders needing to know “how to negotiate in the situation, how do two people come out winners when they both want to be right.”

Participants discussed a need for leaders in EMS being able to make decisions. Participant #7 stated one reason why someone was a leader is to make decisions, “you know what I mean to make the decisions that are the hard decisions, and that is why you are the leader.” Participant #10 described how “leadership was being able to make decisions in chaotic situations and to stay calm.”

Participants wanted leaders in EMS to be able to make decisions on administrative issues as well. Administrative issues listed by some participants were following through paperwork, scheduling and working with a budget. However, more participants discussed leaders in EMS as having the ability to discipline and give feed back. Participant #15 described EMS leaders needing the capability to discipline, “They would be able to talk to people calmly, effectively, without building a barrier between them whenever they are disciplining or whenever they are critiquing.” Participants #11 described the importance of EMS leaders as having the ability to write evaluations, whether they are annual or mid-term evaluations. He discussed how evaluations could serve as written form of feedback on meeting what was expected from an employee and as a form of discipline. He stated, “Most of the time managers in EMS, they don’t appropriately discipline folks. So this all needs to be started

from day one; this is what's expected of you, and then give intermittent feedback sessions. I guarantee you, you'll see your scores at the end of your evaluation and they should be improving."

Empower, encouragement, and trust.

Participants discussed the importance of leaders in EMS as empowering, encouraging and trusting his or her followers. Participant #9 described an EMS leader who "makes sure that he delegates authority, empowers his people, and doesn't see himself as the center of the attention but the organization or the team as the center." Participant #16 added that delegating authority includes listening and utilizing your resources appropriately.

As a follower, Participant #10 connected respecting a leader to feeling empowered by the leader. Additionally, he described the importance of encouraging followers as well, "it's good to encourage people. Not only come to people when they're doing a bad job, but come to say, 'hey, you guys are doing a great job'." Participant #19 described leaders in EMS as being able to motivate and educate his people to do better.

Participants described the importance of leaders in EMS gaining the trust of followers and colleagues. Participant #1 described trust from the perspective of a follower, "of course you somehow need to trust him otherwise you will not respect his decisions and you will just ask and doubt every one of his decisions so I think it is also very important that you somehow gains a little trust with every co-worker." He went on to state that a leader in EMS "has to be the one that most of the guys trust otherwise it won't work." Participant #14 stated how "you

can take management classes, you can do the conflict resolution classes, but if you don't have the backing of somebody else that's there with you then people may not accept you as being a good leader."

Interpersonal skills.

Respondents provided many qualities they wanted their EMS leaders to embody. The researcher analyzed the data to develop this sub-theme. Based on analysis and frequency, the researcher was able to identify the following interpersonal skills: empathy, compassion, honesty, honor and integrity, confidence, patience, accepting feedback and humility.

Participant #7 made the distinction between compassion and empathy, "compassion, concern or like not empathy, I don't know what would you say not compassion empathy, like concern a genuine concern for the person you know like seeing them succeed and not being threatened by this person you know but helping them." Participant #1 also stated that need to be empathetic for others as well.

More participants discussed an expectation of compassion from their EMS leaders. Participant #15 and #19 expect a level of compassion from EMS leaders in their actions, and that they always are caring about others. Participant #7 described an example of why leaders in EMS need to have compassion. "I guess compassionate and care ... I mean these are things that you know leaders have to be strong, and they have to make decisions that are hard. You know when I had to fire people, I had to do things ... you know ... and it broke my heart

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

in some senses ... you know what I mean? I didn't want to have to do it to these guys, but at the same time, I have got a responsibility to the patient."

Participants described leaders in EMS as being honest, having integrity and honor. Leaders in EMS need to be honest in their documentation, should not lie to others, and should not cut corners. Participant #10 placed a high level of importance on integrity, "having integrity is key to me. He described integrity of leadership with this example, another good example of good and bad leadership would be integrity, doing what's right even when no ones looking." Participant #19 provided a similar example, "do the right thing at the right time."

Similarly Participant #15 provided a similar example, "bad examples of leadership would be the people who say, 'Do as I say, don't do as I do.' They do things the way that they feel like they want to do. When it comes down to it, they'll tell you you've got to follow the books, but they'll go around and do it a different way if they want to. If you want to set a good example, then you need to set the example that you want followed." Participant #15 provided this summary, "If you're going to get a policy, you have to live by it. In a leadership position, if you're going to put a policy in place, you need to be able to back it up."

Participant #7, #10 and #19 all described leaders in EMS as having the ability and level of integrity to stand up for what is right. Similarly, Participant #19 discussed how neglect should not be kept silent. Participant #10 discussed how in EMS individuals might be afraid to speak up, "a big thing with EMS, too, being able to speak up. Sometimes people are afraid to speak up and say something they see." Participant #7 wanted to see leaders in EMS as being willing to make

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

a stand in support of patient care, “I think I would want to see that person be willing to sacrifice their position for the right decision in support of the patient so if it means going against the grain and if it is what is right and what is for the patient then they need to have the confidence to stand up for what is right.”

Participant #10 described a similar level of integrity and confidence that is unwavering to patient care and safety, but extended it to crew safety as well. Participants described leaders in EMS as needing to have confidence to the right thing, but should have personal confidence as well. Participant #15 placed a level of importance on personal confidence, “you need to have confidence in yourself. If you don’t have any confidence in yourself, people are not going to have confidence in you either. I think having confidence in yourself is also very important in being a leader.”

Participants described the importance of EMS leaders as being confident, but also discussed the importance of leaders in EMS as being patient and having the ability to stay calm during a crisis. Other participants shared the need for patience and ability to stay calm as well. Participants included EMS leaders as being open to feedback, having the ability to accept feedback from others, and acting upon that feedback. Participant #11 best summarized this discussion on feedback, “A good leader should always welcome feedback.” He went on to state that, “you need to be able to welcome feedback and change your leadership style that’s appropriate for that person.” Participant #14 made a similar statement when he stated, “the willingness to listen and accept different ideas just because it’s not your idea doesn’t mean it’s a bad idea.” Participant

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

#11 discussed the importance of acting upon feedback, “And act upon the feedback, don’t just absorb it and do nothing about it. You need to be able to actually take that feedback and do something with it, not just ignore it.”

Participant #10 provided an example of where EMS leaders were not accepting of feedback of criticism, “I’ve worked with people before that I’ve spoke up and said something and they ostracized me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.”

Participant #12 discussed the importance of leaders in EMS as not bringing themselves above other EMS providers. He went on to discuss EMS leaders respecting others and not trying to compete with them. Participant #19 discussed the simple importance of just being yourself as an EMS leader and how you have to accept your own actions and feedbacks. Participant #15 shared this sentiment, “the first step would be, people would have to be willing to take responsibility for their actions.”

Participant #16 described EMS leaders as needing a level of humility and not disrespecting others, which she described as being “someone who’s up on top and in charge, but isn’t overbearing and over-domineering. And doesn’t talk down to the other people they’re working with, which was one of the major bad rules of leadership; someone who talks down to people you’re working with.” She listed being disrespectful as the worst thing of all, and stated that leaders in EMS “need to be humble enough to accept that you don’t know everything.”

Participant #10 stated, “there’s stuff you can always learn and develop.” Participant #9 discussed EMS leaders needing to be able to admit “where we

have more expertise at and where we don't have expertise at and be able to develop ourselves to get to that point where we feel comfortable to admit to everyone else and to ourselves that this is our profession." Participant #11 discussed how good leaders know when to ask others for help or when to ask for time to figure something out. Participant #14 described this as when leaders "recognize when they're over their head, their willingness to ask for help."

Professional skills and characteristics.

Being a good paramedic was one of the traits listed as primarily important for a leader in EMS. Participant #1 discussed this at the first point of being a leader in EMS, "he at least should be a good paramedic so you don't doubt his professional skills so that is the first important point." Participant #4 shared a similar point, but also believed leaders in EMS first need to be good leaders in the practicing field or field leaders.

Participant #7 described the importance of first having field experience and being a good provider before becoming an EMS leader. He centered the importance on EMS leaders needing to develop a concern for patient care by stating, "First of all there is a real genuine concern for patient care. This has to be in front of every other decision that is made, financially, medically, I mean the whole system." Participant #10 similarly discussed the importance of leaders in EMS remaining patient advocates.

Participants discussed how leaders in EMS have to lead by example and shared experiences of having a mentor in EMS. Participants described leaders in EMS needing to be mentors and educators to their staff. Participant #7

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

described his mentors as being more interested in him in a larger scope. He believed that leaders in EMS need to have the goal to create somebody who was better than they are and should focus on helping others not make the mistakes that the leader made. Participant #14 contended, "It's kind of hard to be taught to be a good leader unless you have one very important thing and that is very good guidance. In order for you to be a very good leader you have to be guided by a good leader that can show you or can teach you how to be a decent leader."

Participant #10 described how he was taught to lead by example in his leadership and "practicing what you preach." Participants described the importance of EMS leaders leading by example. Participant #13 described how leaders in EMS must set good examples for others to follow. Participant #7 described the measurement of leadership as who was following you, "the measure of leadership is who is following you and that can be good and bad." Participant #15 believed that EMS leaders should only set examples that they want followed, "You need to set the example that you want followed."

Participants expected that leaders in EMS be fair, diplomatic and have a willingness to treat everyone the same. Being treated the same was an important display of leadership for Participant #14, "Treating everybody the same is huge for me." Participant #18 described being fair as one of the most important skills he learned during his ten years in EMS. Participant #16 described this as the Golden Rule, "the leadership qualities I expect are pretty much the leadership qualities that I myself would give. I expect the same from

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

anybody else that I would give them. It's like the golden rule. Treat others the way you want to be treated."

Participant #15 discussed the importance of leaders in EMS as being able to remain neutral or non-emotional in a situation by hearing both sides equally in order to be able to rule a judgment fairly. She was not sure if neutral was the correct word to describe what she means, "I'm not 100% sure that neutral is the right word. What I'm looking for, is if I was going to have to define the term neutral for this particular conversation, I guess I would say, that it would be the ability to base a decision on fact and not emotion." She went on to discuss the difficulty of completely separating emotion out of decisions, but stressed the importance of leaders in EMS trying to remain neutral as she described it.

Participants also discussed the importance of leaders in EMS as having the ability to separate personal from professional. Participant #14 stated that leaders in EMS cannot take everything personal and gave this example, "One of my very good friends is my assistant manager for the service and we have had knock down drag out fights at work but because of our professionalism and where we've been and we know how to act and work, we know how to work and act outside of work, still comes over for beer, watches a race, have a great time but when it's at work, it's work. It's not personal and we both know it, and it is very hard for some people to take this job not personally because you're in a closed environment. You feel very responsible for the patients that you take care of because you are responsible and you take that responsibility sometimes too personal when something goes wrong."

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Similarly, Participant #15 described the close environments that many work in EMS, how quickly friendships can develop, and how leaders need to be able to separate personal from professional. She went on to share the importance of having this ability as a leader in EMS stating, “I think that’s very important for somebody who is going to take on a leadership role. I think it’s important for anybody, truthfully. In our situation, I think that would be an important key factor, regardless if they were in a leadership role. Especially, if you’re going to be in a leadership role. You cannot play favorites. You can’t let emotions weigh into it. You have to let your professional stay separate form your personal.”

Both Participants #15 and #18 shared examples of poor leadership or poor leadership decisions that were made because a leader promoted a friend into a position for which he or she was not qualified. Participant #18 shared his perspective on this, “The most important thing I learned in leadership, there is something wrong going on in our countries here in our region, Jordan, Saudi, and Qatar. That is the nature of relationship between the team core itself. Sometimes they deal with as friends, they make a favor to Qatar. During the work, this is a problem ... Okay, friendship good but keep it out of the work. Sometimes you need to work, sometimes you need to be firm with your partner or the guys that follow, sometimes they did [make] some mistakes.”

Many participants described the simple importance of leaders in EMS as being professional. Participant #3 described leaders needing to be professional when managing people, and Participant #6 stated he has learned how to help

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

people in a professional way. Participant #15 listed professionalism as a good strong leadership quality. She went on to describe professionalism needing to be in “just about everything that you do. In the way you present yourself and your appearance everyday ... that you’re showered and clean ... in the way that you speak to people ... in the way that you handle your patients ... in the way that you handle the phone when you answer the phone, I think that being professional is absolutely one of the top important key factors to somebody that’s going to be in a leadership position.”

Participants discussed the importance of EMS leaders being respectful of the people around them. Participant #16 stated that disrespect was the worst thing of all. Participant #18 included respecting the humanity of patients, relatives, and time. Participant #15 and #18 stated the importance of leaders in EMS having the ability to maintain a level of timeliness, or respecting the time of others. While discussing the topic of respect he stated, “This is very important for me, these leaders. Time, people, and your job.”

Participants discussed the importance of leaders in EMS as being proactive, thinking ahead and having the ability to change. Participant #9 described leaders in EMS as being *change agents*. He described a role for leaders in EMS as being change agents and helping others, who are most often resistant to change, to become accepting of the change. One way to do this was to listen as discussed by Participant #1, “They know what to change, when to change and how to change so being a good leader you need to be a good listener from your lower people.”

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Participant #17 also described leaders in EMS as having the ability of thinking ahead and being “proactive instead of being reactive to everything.” Participant #15 described thinking ahead as having *foresight*. He also shared how he was given a leadership position because someone saw his potential and that he had natural foresight. He still remembered being told, “And that’s what we need. We need people that have that natural foresight from an employer.”

Participant #8 provided an example of leaders in EMS needing to be change agents and proactive, “If you have someone with good education or high level education, they will develop the work to the best, but if we still have some people they have the same old way that the EMS was worked 20 or 30 years ago, then it will not develop any more. It can’t stay in the same way, the same skills, the same education, same everything that will not going to work, will not develop the EMS anyway.” Participants described the importance of leaders in EMS as remaining open minded, and not to become close-minded as those described in Participant #8’s example.

Participants shared the EMS phrase of avoiding tunnel vision to connect this idea of remaining open-minded. Participants described the importance of leaders in EMS to not develop tunnel vision. Participant #9 described tunnel vision as being “when you only see what is in front of you, you don’t see everything else that is behind those blinds on either side and you can’t fully get a global view if you are only looking directly ahead, you know there are things to the right of you, there is aspects to the left of you, and even behind you. You have to do a 360, you can’t do even a 180, a 360 turn, evaluate everything for

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

what it is worth, because sometimes the information that we miss, is the integral part to what is needed for salvation of a particular situation or case.”

Similarly, participants discussed the importance of a leader in EMS as being flexible. Participant #5 discussed how being flexible can both be a good and bad thing, that it can cause you to gain and loose the respect of others. In contrast to Participant #9 who described the importance of being authoritarian at times “because there was no wiggle room so I had to get done at the moment.” Similarly, Participant #16 described a leader in EMS as “someone who can take control of a situation and deescalate a situation.” The balance for flexibility and authority in EMS leadership was discussed and described by participants as being unique. Participant #11 believed this is a particular form of leadership, “relations to leadership skills on the job, you have to learn to take control of a situation, and that’s a particular form of leadership, I believe.” Participant #15 believes that “somebody with good leadership skills has got to be able to take charge of multiple facets.”

Participants described ‘being able to take control’ as part of ‘being able to work under stress.’ Participants described the importance of being able to do this in the field practice of EMS, “controlling things, and that means controlling other crew members, patients, patient’s family, and bystanders on the scene” as described by Participant #10. Participant #15 described, “as a leader, I’ve learned to look at the situation as a whole and make decisions based on what I’m seeing and what I’m hearing; like I said, controlling my own frustrations because if you’re going to lead a group of people, you can’t become frazzled in a critical

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

situation.” She went on to state, “leaders in EMS need to remain calm in a crisis situation.”

Participants discussed how working in EMS often means working in a team. Participant #15 stated, “I think that team building is a great thing to teach in EMS. EMS is a team effort. You work in pairs or more. I think that team building is especially important in EMS.” Participant #3 stated, “leadership without people it is nothing, you have like to work as a team and show your leadership and let the people follow you and you will be success in that things.”

Participant #9 described the importance of leaders in EMS to understand teamwork and teambuilding. Participant #16 described how leaders in EMS “need everybody to work together to get the ultimate goal completed,” and in order to achieve this goal; an EMS leader needs to know how to pull from the resources around them.

Participant #15 discussed the importance of EMS leaders promoting quality outcomes. She described, “quality of the job is what it should be versus just getting the job done.” She also described the difference between saying “Yes, I got it done and yes I got it done the right way, or yes I got it done and yes I got it done in a timely manner.” She described how getting it done right can make a difference when working with others as support for team building and teamwork.

Participants #6 and #19 both described the importance of transparency when being a leader in EMS. Similarly discussed by participants was seeing EMS leaders as being touchable or reachable. Participants wanted their EMS

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

leaders to be more than someone who sits behind a desk and was never seen or heard.

Participant #7 described this as “reachable, in the sense of like, we don’t have to go to dinner together but at least hear me out if I have gone through all the steps and the chain of command and even just in general being willing to ... ok ... show up at a station one day and say, ‘hey, what is going on guys?’ you know ... I mean get out of the office and touch people again in the field.”

Participant #19 provided this example of visibility, “Yea, you don’t need the crown to be king, even though if they take your crown or leave it for you, you will be the king. The leader is like an uncrowned king and anytime, every time, anywhere, everywhere he will be the same, but the manager will know if he has no other tools. He doesn’t have his tools or out of his office, he will not be and the people sometimes to approve from us and manage it all up.”

Future Need: Development of Leadership Education

The fourth and final theme developed from the data of this study is a future need and development of leadership education in EMS. The data supported the development of undergraduate course or courses on leadership, which include scenarios and simulated training and textbook for EMS leadership. In addition to developing a course, the data supported thoughtfully adopting practices from other professions and a need for continuing education on the topic of EMS leadership. These points of future need and development are discussed in this section. Complete detailed findings from the research for this theme are included in Appendix F.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Participants discussed the need to develop a course or courses on leadership in EMS and described what they should look like. Participant #11 stated that many of the problems he sees in EMS are related to the lack of leadership education in EMS, “If you turn a blind eye to it then you’re not going to be able to solve the issue. It all goes back to EMS leadership, there’s not enough training, there’s not enough education in it, there’s not enough practice.” Participant #5 stated that, “we should have leadership classes in every program.”

Participant #6 described the need for a book on EMS leadership, “I think we need specific books for leadership included in the sequence like emergency 1, emergency 2 and leadership 1 and leadership 2.” Participant #9 who discussed the need for a minimum of three leadership courses shares a sequence order of teaching leadership. Participant #11 contended that one course or one semester may not be enough.

Participant #9 described his contention of three leadership courses as, “I think that every undergrad degree, every program should have a minimum of three leadership courses, three minimum. Of course, tying up everything, bringing everything together because, as I said, your foundation builds upon, was going to build a bigger building, you know if you have a small structure and you keep on building, it was very important. So, if we start off with something strong informing our paramedics what is in the future for them or how they should be looking to other managers and maybe sharing with them.” Participant #11 described a similar sequence of courses, “if you have Leadership 101. Need to

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

have Leadership 201 or 301. Make it as progressive study, so that you just don't get one leadership course."

Participant #1 discussed adopting practices or learning from firefighters, "I think it wouldn't be too bad to adopt more from these firefighters leadership training to the EMS system but don't take one to one because it is a totally different organization, the structure is different so we need to adopt it to our system of course." Other participants discussed a need to focus on adopting from communications and management classes.

Participant #15 believed that "as long as you teach people how to communicate, you're teaching them how to be confident. As long as people are coming out and they're confident, they're going to be able to communicate with their partners, which in turn is going to make them have a better working relationship in the field. It has really nothing to do with the whole leadership piece, unless the confidence these people have that you teach them at a basic level when you're teaching them their classes, then takes them into a leadership role. The more confidence people have in themselves, the further they're going to go in life. The further we're going to go. I think that it starts with communication and team building skills. Leadership follows for those that are truly interested."

Participant #7 described the importance of management classes. "I think even some management classes, like just what is management, how to manage these things, because whether you are trying to keep the inventory straight in the ambulance or you are trying to do a multi-million dollar budget you need those management skills to be able to have people to support you and do things and

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

you know recognize things and develop policies and procedures, and to be thinkers,” he stated.

Participant #11 discussed how these courses could vary in how the coursework is delivered, “You can come in, whether it can be a PowerPoint or it can be a sit down and talk how are things going with a senior member, it can be in the form of a book, any type of media you can put it in. You may be able to tailor that training for folks. Offer it to where, ok, well, we have it online. If you just want to do the training online or we have a class that you should go to or we have course that you can go to. It needs to be in multitude of different ways, because not everyone is responsive to like an interview for example, not everyone’s responsive to death by PowerPoint.”

Some participants shared a belief that you cannot teach leadership. Interview #7 shared: “I don’t necessarily know that you can teach leadership. I mean it is not something that you can put into a rubric or you know an outline to say if you do these 10 things you are a leader. Again the measure of leadership is who is following you and that can be good and bad, so I think it is trying to as we are developing these curriculums, we keep putting in these affective things and I think some of those if we really can track them and find out does somebody really have empathy. I mean how do you really do that because sometimes people have a different response to stress.” He continued to state how it is important remember that “leaders are people and we have to develop people and that is different than developing a provider.”

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 4

Many participants shared a need to have simulations or scenarios that develop leadership skills that include feedback as discussed by Participant #3, “like scenarios like practical examinations about leadership evaluations and getting also feedback from them after being evaluated.” Participant #6 stressed, “we need to practice it, not just learn it. Practice it, train it for leadership. If we have, like, for example, class lab for leadership, lab class for leadership.” Participant #11 noted courses need to “put together didactics for leadership because it just lacks most of the time.” As noted by these participants, evaluated simulated education and scenario based training is already commonly used in EMS training.

Participant #11 described the need to develop scenarios that were similar to what the job requires of EMS leaders. Participant #15 gave an example of how scenarios can develop leadership skills such as team building, “I think that they need to focus a lot on team building skills. There’s actually scenarios that you can get people to work through together to get them to collaborate their minds.” Together these participants expressed a shared vision of developing real life scenarios that prepare EMS leaders for the actual profession.

Similar to the discussion on the role of simulation and scenarios in teaching leadership skills, participants discussed having a leadership internship. Participant #16 described this internship as, “pretty much the same as when you’re in a preceptor role. When you’re doing your clinicals, you’re in a preceptor role. Then at that point, you’re more concentrated on the leadership aspects. Not necessarily the patient care and all of that. It’s just the decision-making roles and

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

the critical thinking.” Participants compared a leadership internship to the traditional field and clinical internship found in traditional EMS education.

Participant #11 stated, “there needs to be an increased in leadership awareness and not only in-house, you have your own local training program.” He continued to describe how he has hardly seen any continuing education on leadership. He described how from the state or federal level, “If you look at the requirements per say of what it takes to renew your license, often times leadership is not even in there. They focus on the medical, but they don’t say anything about leadership.” He felt this lack of awareness and requirement should change, “There also needs to be something coming from either the state level or federal level or even an international level, because it needs to be tailored for what region that you’re in.”

For Participant #9, he tied the lack of leadership education in EMS and lack of development to having lost EMS professionals because of a resulting lack in opportunity, “we have lost so many great paramedics to other areas because we haven’t had that, how do you say, we haven’t had that pathway where they can continue to grow further. Most people either get into two things in EMS: education or management, but we can continue to develop further you know in management, in education, in career path I think we will retain a lot of the great medics that we have in our field and right now most of those people, most of the people that in EMS unfortunately, that have been in EMS for years are not the cream of the crop, and I hate to say that, the majority of guys who are on EMS for the last 20 years are not the cream of the crop because those guys have a

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 4

certain value about themselves an eagerness to continue further that they want to lead in the profession or something better but if we ourselves develop ourselves, grow, lobby for better jobs, better wages, better opportunities, I think we will be able to retain a lot of these great medics we have lost in the past.”

Summary

Chapter 4 presented the findings of the study as discovered by the researcher. The researcher developed four major themes from the analysis and presented these themes in this chapter. The themes presented were presented in a chronological order including: (1) How Leadership Was Learned, (2) Who is a Leader in EMS, (3) Leadership Skills, Qualities and Characteristics of Leadership, and (4) Recommendations for the Future as discussed by the 19 participants.

Chapter 5 – Conclusion and Recommendations

Introduction

This chapter summarizes the study by revisiting the purpose and research questions of this study described in Chapter 1. Conclusions presented herein are drawn from the data presented in this study and connections between the literature review and the research findings of this study. The chapter will conclude with recommendations for action and future research.

Summary of the Study

The purpose of this phenomenological qualitative study was to learn from those with multi-national background in EMS working in Riyadh, Kingdom of Saudi Arabia how leadership in EMS is internationally learned. In addition to this central research question, sub-questions were focused on what these EMS providers learned about leadership as students, throughout their careers, and how they identified and viewed leaders within EMS organizations. The last emphasis of the research was to invite respondents to look towards the future to identify if there are leadership skills or topics that EMS students should learn and or develop.

The study was significant because the history of leadership in EMS is marked with strong criticism on the performance of leaders in critical situations. Others have called for further research and understanding on this unclear topic within the EMS profession. The body of leadership knowledge in EMS is limited and this study will add significant value to academic knowledge on this evolving

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

aspect of the EMS profession. Because there was concerns centered on the understanding and need for further research in EMS leadership, this study allowed the researcher to make recommendations for a variety of stakeholders of the EMS profession to consider.

The phenomenological methodology used in this study focused on interviewing EMS providers who met requirements to participate in the study. In total, 19 EMS providers with international experiences in EMS from multiple nations were interviewed. Their responses to ten interview questions were coded and themed. Four major themes emerged and based on these themes and data the researcher was able to identify these major findings.

The concept of leadership in EMS appears to be blended with immediacy of action and managerial imperatives. Leadership is often limited to the role of providers in the ambulance or on an emergency scene. The researcher would describe this as field leadership and this appears to be a limitation of how leadership is expressed in the data. With the exception of the discussion on leaders in EMS as being change agents, an understanding of leadership in terms of engaging in strategic planning, professional development, and organizational development was not present in the findings from the interviews.

The researcher attributed this limitation on the topic of leadership in EMS to field leadership as being a reflection of how these participants learned and/or experienced leadership. In general, leadership was described as being learned in three ways: mentoring, on the job experience, and working with other professions. These three methods for learning leadership can be summarized

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 5

into one: leadership in EMS is learned peer-to-peer. Mentoring was discussed as gaining experience from your co-workers and more experienced providers that can start as early as being an EMS student.

Participants discussed the importance of experience or on-the-job training. In general, the focus of on-the-job training from the perspective of practicing EMS providers and the absence of a broader perspective on leadership beyond being a provider or shift supervisor is not surprising. Within the description of learning from experience, participants discussed learning from working with or for other professions. There were three professions where exposure to and learning from the leadership of others arose most often in the interviews: fire departments, branches of government and/or military, and police departments. One participant discussed value gained from working in business, and another discussed how life experiences factored into her leadership abilities.

Within the three professions highlighted, there were comments as to how these professions provide structure and have standing protocols, and for some participants, these protocols were viewed as a source of leadership. Again, these protocols governed field leadership during emergency responses in the field and command structure of a large-scale incident and did not speak to or address any organizational development or strategic planning skill requirements.

Within EMS training, participants discussed how leadership was taught in their EMT or paramedic courses. The discussions indicated the focus being on field leadership. Triangulation of what was discussed emphasized field leadership and patient management as principal concerns of the respondents. It

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

is important to note how some participants described how they gained team leadership skills in training scenarios or simulations during their EMS training.

Others described learning leadership from undergraduate EMS-related courses that were in addition to their core EMT or paramedic training program. One participant discussed learning leadership in critical-care paramedic training; again, reinforcing the emphasis on field leadership. Others discussed learning leadership from management and education courses while only one participant described taking a leadership course in Australia. Those who were perusing graduate degrees or had actually completed graduate level courses discussed learning leadership in those programs. It is important to note that these graduate programs are only related to EMS in terms of being focused on healthcare or emergency management, and are not graduate programs solely focused on EMS.

Participants acknowledged that they did not have any formal training in leadership within their EMS education or training. Others acknowledged they did not have in-depth discussions or lectures on the topic of leadership in EMS within their education. Within the conversations presented by the participants, several reasons were cited for the lack of leadership training. In general, respondents believed they were expected to learn leadership through experience, on-the-job or as something they must learn on their own. From this, it can be deduced that leadership in EMS in an international context is taught only to the extent of how necessary good field leadership is required for practitioners to succeed in their fieldwork and not through actual leadership training programs.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

Though leadership education in EMS is focused on being a leader in the field, participants acknowledged leadership roles exist at many levels of the EMS profession. It was discussed that educators, dispatchers, and EMTs are all potential leadership roles. It was discussed how EMS systems can limit the role of EMTs as serving in leadership roles because of the lower level of licensure required. Therefore, it was more frequently discussed how paramedics, shift supervisors, and EMS managers or administrators are more prominent leadership roles within the EMS profession.

Within the data, an international profile of an EMS leadership path emerged. The data strongly indicated a prominent need for EMS leaders to be communicators and listeners. Being able to communicate is a skill that was discussed as one which is developed throughout a career. Being able to communicate was expressed as essential to being able to lead effectively because EMS leaders need to be able to communicate with their staff, hospitals, and other organizations. Likewise, EMS leaders need to be able to listen to their staff because these participants find themselves going to their leaders with problems or concerns. The international need for EMS leaders to be communicators and listeners is well supported because they need to be problem solvers.

EMS leaders need to be able to solve problems and are expected to follow through on decisions made. Within this, EMS leaders need to be able to resolve conflict and have the ability to de-escalate a situation. This includes being able to facilitate individuals to collaborate to solve a conflict or negotiate a solution

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

where there are only winners. Along with being problem solvers, EMS leaders are decision makers. Internationally, EMS leaders are faced with a wide spectrum of decisions to make that range from operational or team problems to administrative issues such as staffing, budget, and so forth. To achieve the goal of resolving conflict and problem solving, an EMS leader needs to be able to talk in a calm manner to individuals under both normal and chaotic situations.

EMS leaders need to empower, encourage, and trust their employees. Participants discussed being empowered as having authority given to them. When authority is delegated there needs to be encouragement when someone is doing a good job, and not just feedback when someone is doing a bad job. At the root of empowerment and encouragement is trust. Internationally, EMS leaders need to trust their employees, and the employees need to trust their leader.

Within the profile of an international EMS leader are several interpersonal skills. Participants discussed a need for genuine concern, being honest, transparency and having integrity. There was an emphasis placed on integrity, which one participant defined as “doing what is right even when no one is looking”. Within integrity was the desire that EMS leaders speak up when something is wrong, even if this meant speaking against higher authorities and putting their own jobs at risk. The focus of most respondents was that leadership ultimately needed to focus on what was best for the patients being served by EMS and for the employees of the organization.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

Internationally, EMS leaders need to be confident, but this confidence needs to be balanced with humility. Having humility allow EMS leaders to collaborate with others, ask for help when they are in over their head, and, in some instances, recognizing when they are in over their head. Humility was characterized as an acceptance of one not knowing everything and realizing there is much to learn. EMS leaders need to be confident enough to make decisions, but humble enough to not take credit for everything and recognize when they need to ask for assistance.

EMS leaders need to be professional in their actions, appearance, and interactions with others. EMS leaders need to lead by example and should model the behaviors and demeanor that want to develop in others. Therefore, the focus expressed by respondents was on leading by example or practicing what you preach. There is a strong connection between leading by example and mentoring. Participants discussed modeling and mentoring as being strong sources of their learning. This connection between interpersonal skills and modeling previously discussed, for example, the strong characterizations and demand for integrity, become critical aspects of the kind of leadership that would foster followership within EMS. If having followers is a metric of leadership, then being a good role model or example is what EMS participants valued.

There are strong expectations for EMS leaders to be neutral and fair in how they treat everybody. This continued to reinforce the importance on how leaders act whether it is by setting a good example or through interacting with staff to set precedents or solve conflicts. The close-environment work settings

typical in EMS have the potential of creating professional and personal relationships, both positive and negative. EMS leaders need to be able to distinguish the two types of relationships they may have and not let one affect the other in their decision-making related to assignments, promotions, schedules, pay, and other employment issues.

Having the ability to remain neutral or fair connects EMS leaders to having the ability to avoid tunnel vision. Tunnel vision is best summarized as only seeing what is in front of you. This compares with being open-minded or with being a change agent as described by participants. EMS leaders need to advance the profession. Advancing the profession has many obstacles and appears to be an international problem based on the study results. One participant cited an opposition to change as one of the primary barriers to advancing the profession as being people with 20 to 30 years of EMS experience.

EMS leaders need to be focused on quality. Quality includes the service and patient care as well as employment conditions and opportunities. Quality can be achieved through teamwork and team commitment to standards. Therefore, EMS leaders need to be able to engage in team building activities that grow consensus and agreement.

EMS leaders need to be good EMS providers and have strong practitioner-level skills, as this will help to establish credibility for themselves and not undermine the leader. They also need to be seen and heard, not just thought of as someone being behind a desk. EMS leaders need to be able to

take control of crises, conflict, and chaos. However, this needs to be coupled with strong skills from the EMS profession and professional skills. Leaders need to be able to delegate, empower, and collaborate well with their staff. Leaders need to be trusted and need to trust their team while promoting a high level of integrity, honesty, and ability within their teams. Exemplary actions, communication, and listening are essential to leading in EMS from an international perspective.

Findings Related to the Literature

There are many findings from this study that are related to the literature discussed in Chapter 2. Catlett et al. (2011) discussed EMS engaging in interdisciplinary efforts with multiple types of agencies. Within the interview data, there were a number of references to learning from multiple types of agencies, but responding with and being part of those organizations. The multiple agencies discussed in the literature and discussed by Catlett et al. (2011) are law enforcement, military, fire, and hospitals. The participants included all of these agencies as well and discussed on how some EMS professionals may in fact be crossed trained between these agencies.

Catlett et al. (2011) described EMS leadership engaging in Mutual Aid Agreements (MAAs) as a proactive opportunity for EMS leadership to participate in planning with multiple agencies. This suggested an opportunity to take interdisciplinary efforts made by EMS leaders and other agency leaders to another level of cooperation and to address some of the potential operational risks inherent in multi-agency collaborations. In the data, there were multiple

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

discussions on mass-casualty incidences, and how these require coordination with other departments. However, the data and participants mostly focused on coordinating with fire department officials.

Similarly, Catlett (2011) described interacting with hospital officials and having an understanding of the healthcare systems in their area. Within the data, were a number of discussions reinforcing the requirement to understand healthcare systems and how best to work with physicians. EMS Medical Directors and physicians related to EMS were described as EMS leaders in the interviews. Therefore, it is easy to conclude that EMS leaders do need to be able to understand and interact with other agencies, hospitals, and supporting physicians. This is well supported given the complexities faced by EMS leaders to provide patient care.

Ludwig (2012) described EMS leaders as finding themselves in multiple types of leadership roles ranging from large-scale disasters to day-to-day operations. This range of possibilities in EMS leadership roles is discussed in the data; however, most of the data discussion was focused on scene management and management activities. Within the data were discussions on the importance of EMS leaders empowering their employees, providing opportunities and in providing support. These discussions support Gienapp (2005) and Powers (2006) who stressed the importance of leaders recognizing the abilities, education, and experiences of those who they lead. Gienapp (2005) described this as selfless service, and, within the data, others described this as

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

not taking credit for work performed by others, empowering their team, and recognizing both good and bad efforts.

Empowerment is clearly found in the data as well as trust in terms of delegating authority, but also as means of developing followers. Powers (2006) discussed the importance of hiring transformational leaders because it will encourage employee contributions through a system of trust and empowerment. Powers (2006) described trust as being mandatory, though the data does not clearly support trust being mandatory, it does support trust as being important. Powers (2006) described this phenomenon as power with others and not to others. The data supported Powers (2006) description through the discussion on the importance of team building, team work, and collaborating with staff and other departments or agencies.

The data presented a strong alignment with the importance of EMS leaders remaining focused on patient care and should remain unchanged throughout the decision-making process. Gienapp (2005) stressed the importance of leaders clearly articulating goals. This is supported by the data through the discussions on the importance of EMS leaders being communicators and seen in the field. The precedent that EMS leaders should place priority on and be influenced by patient care in their decision-making is discussed by Gienapp (2005) as a leadership principal applied to EMS from the military model for leadership where decision-making is focused on and guided by the needs of the soldier.

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 5

Gienapp (2005) discussed other principals from military leadership and applies these same principals to leadership in EMS. The military value of honor discussed by Gienapp (2005) was supported by the data, and within the value of honor as discussed by Gienapp (2005) is integrity, which is strongly supported in the data. However, it is important to note that the values of honor and integrity are discussed both in the literature review and in the data. Lester and Krejci (2007) supported the military leadership model because leadership is stressed at all levels, including the individual level. Military leadership as discussed by Lester and Krejci (2007) is supported by the data in many ways. The data supported military leadership as a source of leadership education in EMS. In addition, the leadership structures and roles within other possible responding agencies were described at all levels of the profession with an emphasis on individual and small team leadership abilities.

Ludwig (2012) discussed field leadership requirements for EMS leadership citing former New York City Mayor Rudolph Giuliani as an example. Mayor Giuliani had some leadership principals that contributed to the emergency response community after 9/11: be visible, be composed, be vocal, and be resilient. The data in this study strongly aligned with these leadership principals in practice:

- EMS leaders are expected to be seen in the field and not just behind a desk;
- EMS leaders are expected to remain calm and de-escalate crises;

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

- EMS leaders are expected to be vocal by communicating clearly and with integrity, even when it means disagreeing with their bosses or puts their jobs at risk; and
- EMS leaders are expected to be resilient by solving problems.

In contrast, Cotter (2005) described common character flaws of leadership as being defensiveness, emotional instability, poor interpersonal skills, and weak technical and cognitive skills (p. 111). This discussion by Cotter (2005) was well supported by the data in this study, as the negations of these cited character flaws are all present in the data. The data supports EMS leaders being open to feedback, open to criticism, and able to remain calm and have strong professional skills as both an administrator and EMS provider.

Hagen (2011) discussed EMS leadership roles at three levels, *Supervising EMS Officer, Management EMS Officer* and *Executive EMS Officer* (p. 36). The data in this study did not clearly support the role of an Executive EMS Officer. However, it did support both the Management EMS Officer and Supervising EMS Officer roles, specifically described in the data as shift leaders. Ludwig (2012) discussed EMS leaders needing to remember, “that we manage things and we lead people” (p. 1); this is well supported by the data in this study. Likewise, the data strongly supported Foster et al. (2011) who compared and contrasted EMS managers being focused on operations and leaders being visionaries who take responsibility for developing other individuals and fostering a dynamic environment capable of change.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

The role of EMS leaders as discussed by Foster et al. (2011) and Ludwig (2010) is supported in the fact that the data described EMS leaders as problem solvers and decision makers who must be capable of separating personal from professional. Ludwig (2010) described how EMS leaders find themselves in circumstances with an employee wanting an emotional decision made, or how EMS leaders often find themselves making a split-second judgment call based on limited information. Again, the data placed importance of EMS leaders being fair, neutral decision-makers and problem solvers.

The data supported through examples provided by the participants that EMS systems can be resistant to change. Powers (2006) described EMS as having resistance to organizational and environmental change. Powers (2006) described the importance of leaders to be able to approach those resistant to change with openness, trust and to be able to listen to their concerns. Though the data did not directly discuss how to resolve the resistance to change, it did discuss EMS leaders as being open, trustworthy, and able to listen to concerns.

Similarly, Foster et al. (2011) discussed other characteristics of EMS leaders as having Integrity, Compassion, Accountability, Respect, and Empathy (I CARE). The data reported similar characteristics with a particularly strong emphasis on the importance of EMS leaders having integrity. There were discussions on having both compassion and empathy, even though in the data these are not well defined and were described together. The data described EMS leaders as needing to be able to accept responsibility for their own actions, and, lastly, to respect others in a fair and professional manner.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

Both Miller (2013) and von Wyle et al. (2009) stressed the importance on how EMS leadership skills can be learned through simulation. Learning EMS leadership skills through simulation was strongly supported by the data as both a source of how some learned leadership skills and as a future need. However, it is important to note that these discussions found in the data were focused on field leadership. EMS education and training programs utilizing simulated education to develop leadership skills was supported by both Miller (2013) and von Wyle et al. (2009). Miller (2009) contended that EMS programs do not need to go through complete changes, but to take advantages of existing successful models. This too was supported in the data through discussions on learning from other professions and adopting models from both fire and governmental departments such as the military.

Williams (2002) discussed the need for effective future leaders mentoring programs in EMS as most mentoring is done informally. This discussion was well supported by the data in that not one participant discussed having a formal mentor as defined by Williams (2002). Instead and as discussed by Williams (2002), informal mentoring programs in EMS for these participants were done as on the job training and learning from a more senior partner in the field. Thus, contention of informal mentoring made by Williams (2002) as being the most common form of mentoring was strongly supported by the data in this study.

The data discussed mentoring as being an opportunity for current EMS leaders to develop future EMS leaders who will be better than they were because the current EMS leaders were able to reflect on mistakes, learn, and pass this

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 5

knowledge onto the future generation. Foster et al. (2011) described this as vision, which allows one to realize mistakes and missed opportunities as they mentor the next generation to do better. Thus, a strong connection is present between mentoring as being a potentially strong source of leadership education. However, as previously discussed Williams (2002) supported in his contention of informal mentoring as being the most common form of mentoring.

The data supported the importance of how leaders need to lead through their actions. Porter (2004) discussed how EMS professionals influence others through their day-to-day actions. Porter (2004) placed importance on a person's actions as being the single, most measurable conduct of his or her leadership. Within the data is a description of the amount of followers a leader has as being the measurement of leadership. Though there was disagreement on the measurement of leadership, there was strong agreement between the data and literature on the importance of a leader's action.

Participants discussed how potential EMS leaders have left the profession over the years because the lack of career opportunities. Alexander et al. (2008) described the necessity of EMS leaders being able to meet the changing healthcare system and continue growth within the profession. Alexander et al. (2008) connected having higher levels of education to greater career opportunities in EMS. The data supported Alexander et al. (2008) contention that a strong support for being able to work with other agencies, hospitals and having leadership development in both the initial and continued education of EMS professionals.

LRNG EMS LDRSHIP: Multinational Qualitative Study

CHAPTER 5

Morton and Vu (2011) discussed how international Emergency Systems development are another growing field within the specialty of International Emergency Medicine. The data were supportive of this statement made by Morton and Vu (2011) and described similar challenges across multiple nations and with some examples specific to a region. Bring et al. (2012) stated an importance for further research in pre-hospital care due to the increasing number of graduating ambulance personal and as the data and literature reveals, there remains a gap in understanding leadership skills in EMS. However, an international consensus on the importance of leadership courses and simulations emerged as well as the profile of an EMS leader.

Surprises

The surprises of this study were positive in nature. As a researcher and student, I was surprised, not only at the number of EMS professionals who scheduled time to be interviewed, but also the amount of information and rich examples each one shared. Their generosity and willingness to share their experiences was surprising. Perhaps it is the anxiety and fear surrounding a dissertation, but the willingness of fellow EMS professionals to participate in this study was a pleasant surprise.

The strong correlation between the literature reviewed and the data from this study was a surprise in that there were only minimal areas of disagreement and mostly strong alignment between my findings and the works of others. It is important to note that though the body of academic research and publications in EMS is limited, this study would support the reviewed research done in the field

of EMS as representative of the field findings reflected in this study. With this said, it was a pleasant surprise to see the level of work done thus far in the profession of EMS and the willingness of EMS professionals from around the world who participated in this study to sit, discuss, and explore leadership in EMS, particularly given that the data and literature described the EMS field as being resistant to change.

Conclusions

Implications for action.

The call for further research on the topic of EMS leadership at all levels should not go unheeded. The data in this study was primarily focused on leadership as a practicing EMS provider and was generally limited to how to be a good leader in the field, or the researcher described this as a lower level of leadership. Discussions on EMS leaders being able to engage in visionary organizational development, strategic planning, and creating change were not present in this study, and the researcher would describe these as higher levels of leadership. There was discussion in the data on EMS leaders as being change agents, but again, those discussions were focused mostly on managing change and overcoming resistance in EMS.

Recommendations for future research.

This study discovered several new areas of EMS leadership that need to be further researched and explored from both international and or domestic levels. The fact that EMS is challenged in developed nations, and is challenged

even more in developing nations needs to be explored in more depth.

Regardless, there are similar leadership challenges being faced by both developed and developing nations. In this study, a profile of an EMS leader was beginning to emerge and this profile needs to be explored in more depth in terms of what is effective, what is important, and how these skills or traits are learned or influenced.

Research on the differences between EMS Management and EMS Leadership needs to be pursued. As EMS Leadership and Management are often discussed together indicates a lack of clarity about the distinction between the two roles. The differences and similarities between EMS Leadership and Management will require further research. However, this same discussion needs to occur at a professional level in the EMS field through conferences, seminars, and meetings. In general, the question of what is an EMS Leader and what is an EMS Manager needs to be discussed, documented, and answered.

Concluding remarks.

This study presented a comprehensive literature review, collected valid data and thoroughly analyzed all of the information collected on the topic of how leadership is learned in EMS from a multinational perspective. The population of this study provided insights to where the international community is in terms of leadership development in EMS, given that the Kingdom of Saudi Arabia is an international crossroads for EMS. This makes the recommendations from this study unique and broader in scope than a nationally homogenous sampling, and thus expanding how broadly the findings can be applied in a global context.

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

Therefore, the researcher was able to make evident conclusions on how leadership is learned in the EMS profession, and is able to make specific recommendations on how to develop and or support EMS leadership learning and evolution to each of the following global audiences: (a) EMS education and training, (b) EMS certificating, licensing and government bodies and (c) EMS organizations.

EMS Education and Training agencies and associated organizations or governmental bodies need to further explore and support research on developing EMS leadership courses. The data of this study is limited to what constitutes field leadership and the researcher contends these skills should be better developed in basic training programs. However, the researcher contends that further development of education and degree requirements in EMS to address leadership deficiencies is needed. As discussed in this chapter, job opportunities, and professional development are hindered by the lack of education in the profession. Likewise, leadership is a complex topic and requires a progression of course work. As the data indicates, EMS leadership is often learned from other professions and from undergraduate courses such as EMS Education, Management, and provider level courses. Therefore, EMS leadership can only be taught to the level of those courses.

It is in the best interests of the profession to develop at-least a required single undergraduate course that explores EMS leadership beyond just being a good leader in the ambulance. This course could explore different styles of leadership and apply these styles to different situations and scenarios that will

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

likely be faced by leaders in EMS through simulation. The importance of simulation cannot go unnoticed as the researcher strongly contends that all EMS leadership courses need to have a strong simulated component to the course.

The researcher does see benefit in offering multiple leadership courses in undergraduate EMS education that progress through the topic of leadership and delves further into specific styles or models of leadership. However, the reality of constraints in University or College requirements must be taken into account. Therefore, the researcher supports the development of graduate level degrees in EMS. In addition, Universities need to engage in conversations to develop the Emergency Medical Services discipline emphasis to already-established graduate degree standards that are currently offered in similar professions; for example: healthcare administration, nursing, public health and public administration. However, this researcher strongly contends that Universities engage in developing graduate degrees solely focused on EMS leadership, research, and development, as well developing EMS Colleges, not just programs.

Having actual EMS colleges would facilitate EMS professionals and educators to better acquire the level of education, support research, and educational development necessary to successfully respond to the ever changing and highly, complex incident and emergency response circumstances facing the world today. As noted in this chapter, there is no reason to reinvent what has already been done. Instead, having EMS colleges as part of a University would allow discussions to occur in an interdisciplinary manner through other University

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

colleges such as medicine, nursing, law, allied health, health sciences, and healthcare administration and ethics.

Similarly, licensing bodies such as governments and professional credentialing and/or certifying bodies and organizations need to support not only the development of EMS leadership at the education level, but need to advocate for leadership development throughout the professional career of EMS providers. The best way for these organizations to advocate for EMS professional leadership development is to require continuing education on the topic. Currently, these organizations are primarily, and in some instances, solely focused on level of medical knowledge and proficiency of certain technical skills. The researcher fully supports the importance of maintaining an evolving baseline level of EMS knowledge and technical skill, but does contend that a requirement for non-technical skills and professional development are needed and would not be a great burden on the individual provider. Any argument against these requirements based on the potential burden should be greatly outweighed by the probable professional development within EMS.

The discussions thus far all apply to EMS employers and organizations. This study clearly documented that leadership, as most things in EMS, are learned through experience and mentoring. At this time, it is not clear what higher levels of leadership are learned in EMS education in its current form. It is important to note that field leadership is being taught; however, there still remains the long-held belief in *learning it as you go* and of EMS as being a sink or swim profession. Therefore, EMS organizations and employers do need to engage in

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

formal training programs that can result in professional growth. Though many may have field training officers and programs in place, the researcher contends that these programs need to be re-evaluated, and that both current and new programs have plans in place for frequent evaluation on the effectiveness of internal mentoring programs.

The need for mentoring programs is also seen at higher levels of leadership as well. EMS organizations need to recognize that transition is inevitable and that future leaders need to be prepared for an uncertain and more complex future. Preparing future leaders needs to be done carefully as the profile of what an EMS leader is beginning to emerge. Therefore, selection criteria must be objective and focused on professional abilities and skills. This can be achieved through mentoring, evaluation, and supporting professional development of individual EMS providers who wish to pursue EMS leadership roles. It is important to note that this study points to a variety of potential leadership roles at all levels of EMS, and that leadership roles are not just limited to the ambulance or an office.

Therefore and in conclusion, this researcher is calling to action those associated with EMS Education, Licensure, and Employment to support the professional development of EMS leaders through research, education, and development. This dissertation set out to answer only a few research questions, but along the journey discovered both answers and new questions for future EMS researchers to explore. It has been an amazing journey and is ending with

LRNG EMS LDRSHIP: Multinational Qualitative Study
CHAPTER 5

a strong sense of professional pride, hopefulness for the EMS profession, and personal accomplishment.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Appendix A: Interview Process Details

Interview Protocol:¹

A qualitative inquiry into how leadership is learned in EMS from a global perspective.

Time of Interview:

Date:

Place:

Interviewer: Mr. William J. Leggio, Jr.

Interviewee:

Position of Interviewee:

Introduction:

Thank you for agreeing to be interviewed for this research project to add understanding for how leadership is learned in EMS from your having been a student and throughout your career. Your inputs will help to define and clarify what future leaders need to be taught based on your international experience in EMS. I want to remind you that our conversation is being recorded, and your comments will remain confidential and anonymous. Let me know if you need to take a break at any time. Do you have any questions for me before we begin?

¹ Adapted from: Creswell, J. (1998). Qualitative inquiry and research design: Choosing among five traditions. Sage, Thousand Oaks. pp 127-131.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Questions:

1. Starting with your first day of training, please share with me your education, years of service, experiences and where your career in EMS has taken you.
2. Please tell me about your own EMS training with regard to leadership. Were leadership skills specifically discussed or taught?
3. During your career as an EMS provider, what leadership skills have you learned?
4. How have you learned your leadership skills within the profession of EMS?
5. What would you describe as good examples of leadership in the field of EMS? What would you describe as bad examples of leadership in the field of EMS?
6. How about within your own organization, are there any good leaders? What roles do these individuals fill?
7. Can you describe what leadership qualities you expect from those you know in EMS?
8. How have your current views on leadership in EMS changed throughout your career?
9. What should EMS training and education programs be teaching about leadership in EMS currently and in the future?

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

10. From your perspective, what leadership skills do current and future EMS students need to develop in order to be successful as leaders within EMS?

Additional questions for depth and breadth to the above questions:

Can you expound on that?

Can you tell me more?

Can you describe that in a different way?

Can you clarify that for me?

What was the effect of that incident?

What were the consequences?

What was your reaction to that behavior?

Can you take me through your thought processes during that time?

Can you please clarify for me who that person is?

Written Consent Form

Leadership Education in Emergency Medical Services

Describe study briefly here.

This research study is a dissertation and is intended to add to the limited and growing body of Emergency Medical Services with a specific focus on how you learned leadership as an EMS student, throughout your career and for you to provide a better of understanding on the topic of leadership in EMS based on your international experiences within the profession.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Invitation

You are invited to take part in this research study. The information in this form is meant to help you decide whether or not to take part. If you have any questions, please ask.

Why are you being asked to be in this research study?

You are being asked to be in this study because you have international experiences in providing emergency medical services and currently work in Riyadh, Kingdom of Saudi Arabia.

What is the reason for doing this research study?

This research is designed to better understand how leadership is learned in EMS from a multinational perspective, and explore leadership topics or skills needed for future EMS leaders based on your experience(s).

What will be done during this research study?

You are asked to participate in a taped interview lasting approximately 30 minutes but no longer than one hour and confirm a transcript of your interview. You may be asked follow up questions if needed but no more than three times and for no more than 30 minutes each time.

What are the possible risks of being in this research study?

There are no known risks to you from being in this research study.

What are the possible benefits to you?

You are not expected to get any benefit from being in this research study.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

What are the possible benefits to other people?

A possible benefit to emergency medical services included a better understanding of how leadership skills are taught and developed as students, providers, and to develop recommendations for how to better prepare future leaders in EMS.

What are the alternatives to being in this research study?

Instead of being in this research study you can choose not to participate.

What will being in this research study cost you?

There is no cost to you to be in this research study beyond the investment of our time and expertise.

Will you be paid for being in this research study?

You will not be paid or compensated for being in this research study.

What should you do if you have a problem during this research study?

Your welfare is the major concern. If you have a problem as a direct result of being in this study, you should immediately contact the person listed at the end of this consent form.

How will information about you be protected?

You will not be named and reasonable steps will be taken to protect your privacy and the confidentiality of your study data.

The only persons who will have access to your research records are the sole researcher, the Institutional Review Board (IRB), and any other person or

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

agency required by law. Upon date of approval by Creighton University Institutional Review Board (IRB) I am required by IRB policy to maintain the data of this study for at minimum three years three months.

The information from this study may be published in scientific journals or presented at scholarly meetings but your identity will be kept strictly confidential.

What are your rights as a research participant?

You have rights as a research participant. These rights have been explained in this consent form. If you have any questions concerning your rights, talk to the investigator or call the Institutional Review Board, +1 402 280 2700 – Main Directory at Creighton University, 2500 California Plaza, Omaha, Nebraska, 68102. www.creighton.edu

What will happen if you decide not to be in this research study or decide to stop participating once you start?

You can decide not to be in this research study, or you can stop being in this research study (“withdraw”) at any time before, during, or after the research begins. Deciding not to be in this research study or deciding to withdraw will not affect your relationship with the investigator or with any emergency medical services organization.

You will not lose any benefits to which you are entitled.

If the researcher gets any new information during this research study that may affect whether you would want to continue being in the study, you will be informed promptly.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Documentation of informed consent

You are freely making a decision whether to be in this research study.

Signing this form means that

- (1) you have read and understood this consent form,
- (2) you have had the consent form explained to you,
- (3) you have had your questions answered, and
- (4) you have decided to be in the research study.

If you have any questions during the study, you should talk to one of the investigators listed below. You will be given a copy of this consent form to keep.

If you are 19 years of age or older and agree with the above, please sign below.

Signature of

Date:

Time:

Participant:

My signature certifies that all the elements of informed consent described on this consent form have been explained fully to the participant. In my judgment, the participant possesses the legal capacity to give informed consent to participate in this research and is voluntarily and knowingly giving informed consent to participate.

Signature of

Date:

Investigator:

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Protocol for Verbal Consent

Thank you for participating.

This will be a recorded interview and I will read the following consent to you.

You were identified following me contacting Saudi Red Crescent Authority or King Faisal Specialist Hospital and Research Center. I contacted these two organizations requesting contact information for EMS providers currently working in Riyadh, Kingdom of Saudi Arabia who has international experience in EMS from either their education or previous employment experiences.

ADD: Address how they were identified as meeting your study criteria.

ADD: Address either how or why they were selected (e.g., how they met your criteria or what the criteria is).

You are taking part in this research study to explore your experiences of learning leadership in Emergency Medical Services during your multinational career. If you have any questions during this interview, please ask. This study aims to add understanding for how leadership is learned in EMS from being a student throughout a career and will help to define and clarify what future leaders need to be taught based on your input and experiences.

This interview should last approximately 30 minutes, but no longer than 60 minutes. There may be a need for follow up questions, but no more than three times.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Let me assure you once again, that your identity will be protected and your answers will be anonymous. There are no risks to you from being part of this study.

You are not expected to get any benefit from this study.

You do have the right to make the alternative decision not to be part of this study.

You are not receiving compensation for being part of this study.

If at anytime and for any reason you feel the need to stop the interview, immediately notify the investigator.

Creighton University IRB policies require me to keep the data of this survey secure and for at minimum three years three months. Only those associated with the study, Institutional Review Board and other persons or agencies required by law will have access to confidential research data. The contact information for the Institutional Review Board and primary investigator have been provided in the consent sent to you electronically. Let me reiterate, you have the right to stop participating in this study at any time.

Do you wish to continue with this study after fully reading the consent sent to you electronically and hearing these words?

Thank you.

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Appendix B: Demographic of Participants

Participant #	Responded or Not	Age	Gender	Nationality	EMS Licensure	Education Achieved	1st Location of EMS Education and or Training	2nd Location of EMS Education and or Training	3rd Location of EMS Education and or Training	1st Location of Working in EMS	2nd Location of Working in EMS
1	R	35 - 44	Male	German	Paramedic	Bachelor	Germany	NA	NA	Germany	KSA
2	N	25 - 34	Male	Saudi Arabian	Paramedic	Bachelor	KSA	USA	Australia	KSA	NA
3	R	25 - 34	Male	Saudi Arabian	Paramedic	Bachelor	KSA	USA	NA	KSA	NA
4	R	25 - 34	Male	Saudi Arabian	Paramedic	Bachelor	KSA	USA	NA	KSA	NA
5	N	25 - 34	Male	Saudi Arabian	Paramedic	Bachelor	KSA	USA	Canada	KSA	NA
6	R	25 - 34	Male	Saudi Arabian	Paramedic	Bachelor	KSA	USA	NA	KSA	NA
7	R	45 - 54	Male	American	Paramedic	Bachelor	USA	NA	NA	USA	KSA
8	R	35 - 44	Male	Saudi Arabian	Paramedic	Bachelor	KSA	USA	NA	KSA	NA
9	R	35 - 44	Male	American	Paramedic	Bachelor	KSA	Australia	NA	USA	KSA
10	R	25 - 34	Male	American	EMT	Bachelor	KSA	NA	NA	USA	KSA
11	R	25 - 34	Male	American	Paramedic	Master	KSA	NA	NA	USA	KSA
12	N	35 - 44	Male	Filipino	EMT	DNS	Philippines	NA	NA	Philippines	KSA
13	N	25 - 34	Male	Filipino	EMT	DNS	Philippines	NA	NA	Philippines	KSA
14	N	45 - 54	Male	American	Paramedic	Associate	USA	NA	NA	USA	KSA
15	N	45 - 54	Female	American	EMT Intermediate	DNS	USA	NA	NA	USA	KSA
16	R	25 - 34	Female	American	Paramedic	DNS	USA	NA	NA	USA	KSA
17	R	25 - 34	Male	Filipino	EMT	DNS	Philippines	NA	NA	Philippines	KSA
18	N	35 - 44	Male	Jordanian	EMT	DNS	Qatar	NA	NA	Qatar	KSA
19	R	35 - 44	Male	Saudi Arabian	Paramedic	Master	KSA	USA	NA	KSA	NA

R indicates the interviewee did respond to the follow up e-mail and provided a response to an age group
N indicates the interviewee did not respond to the follow up e-mail requesting a response to an age group and therefore an age group was selected for the interviewee by the researcher
United States of America (USA)
Kingdom of Saudi Arabia (KSA)
Did Not Specify (DNS)
Not Applicable (NA)

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Appendix C: Findings -- How Leadership was Learned

Node Summary

Node Details

Node Summary

Dissertation

8/6/2013 8:58 PM

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Node

Nickname: Nodes\\How Leadship is Learned

Classification:

Aggregated: Yes

Document	19	205	6,610	221
----------	----	-----	-------	-----

Nickname: Nodes\\How Leadship is Learned\Courses

Classification:

Aggregated: Yes

Document	14	33	1,498	44
----------	----	----	-------	----

Nickname: Nodes\\How Leadship is Learned\Experience

Classification:

Aggregated: No

Document	14	82	1,931	82
----------	----	----	-------	----

Nickname: Nodes\\How Leadship is Learned\Mentoring or learning from others

Classification:

Aggregated: No

Document	14	36	1,520	39
----------	----	----	-------	----

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\How Leadship is Learned\\Other Profession(s)

Classification:

Aggregated: Yes

Document	10	27	1,201	27	
----------	----	----	-------	----	--

Nickname: Nodes\\How Leadship is Learned\\Other Profession(s)\\Buisness

Classification:

Aggregated: No

Document	1	2	82	2	
----------	---	---	----	---	--

Nickname: Nodes\\How Leadship is Learned\\Other Profession(s)\\Fire

Classification:

Aggregated: No

Document	6	8	521	8	
----------	---	---	-----	---	--

Nickname: Nodes\\How Leadship is Learned\\Other Profession(s)\\Military and or Government

Classification:

Aggregated: No

Document	4	14	415	14	
----------	---	----	-----	----	--

Nickname: Nodes\\How Leadship is Learned\\Other Profession(s)\\Police

Classification:

Aggregated: No

Document	2	3	183	3	
----------	---	---	-----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
Nickname:	Nodes\\How Leadship is Learned\\Was not				
Classification:					
Aggregated:	No				
Document	11	27	460	29	

Coding Summary By Node

Dissertation

8/6/2013 8:54 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Node

Nodes\\How Leadship is Learned

Document

Internals\\Interviews\\Interview #01

Yes	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	0.0443	5	1	WJL	7/23/2013 6:17 PM

Yes, I mean we got like for us these leadership things especially happens when I got like this the education for mass incidence or for mass casualty incidence and the leadership training what we are using in EMS was quite related to the leadership that is used for the German firefighters. They got like some protocols for this based on their what's this letter degree?

2 WJL 7/23/2013 6:17 PM

Yeah, this is now I can tell you the German name for this protocol, it is called DV500 but I am quite unable to translate the saying to English so it is like service rule something 500 and so if you would look up on the internet for example the DV500 you will find it.

3 WJL 7/11/2013 10:52 AM

by training so like simulations of different scenarios and then we were just talking about yeah just leadership, how the leader reacted and the one who assessed the situation, so I mean all the other guys from the class we are just like focused on the leader it was not so important with the little guys who are doing around as this was all medical correct but like yeah and we did quite a lot so I assume it was a good practice because I mean you can get a much better possibility to judge these leadership skills in the simulation.

4 WJL 7/11/2013 10:52 AM

Interviewer: So simulation has proven to be a good opportunity for you to or how you did learn your leadership skills with valuable debriefing sessions.

Interviewee: Yes.

5 WJL 7/11/2013 10:54 AM

I mean after now what is it now nearly 20 years, damn I am old, 18 years of service and of course every day is teaching you leadership skills a little bit

Internals\\Interviews\\Interview #02

Yes	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	0.0469	6	1	WJL	7/11/2013 12:44 PM

call for a disaster or like that you need to be leader in that situation. I studied for that subject, yeah, I am not sure about that question about what do you mean by that where leadership skills specifically

Interviewer: So you answered the question, were leadership skills specifically discussed or taught and from your response it sounds as if specifically with disaster, mass casualty you learned leadership skills in that class, correct?

Interviewee: Yeah

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				2	WJL	7/11/2013 12:45 PM
						Here and a little in Australia there is subject about leadership.
				3	WJL	7/11/2013 12:45 PM
						Here I have experience with some guys, his name Abdullah (last name unclear) head of department here and he told me about something can guide me for good points in leadership.
				4	WJL	7/11/2013 12:46 PM
						I learned it in the classes,
				5	WJL	7/11/2013 12:46 PM
						some leadership I learned from the field
				6	WJL	7/11/2013 12:47 PM
						if you have like leadership person or leader you learn something from him, how he managed or how he handled the situation in front of him now, yeah

Internals\\Interviews\\Interview #03

Yes 0.0409 3

				1	WJL	7/11/2013 1:20 PM
						yes, exactly in the University of Eastern Kentucky, United States, we had many classes about leadership, EMS leadership and EMS management which is mainly focused on how to be a good leader and how to manage situations.
				2	WJL	7/11/2013 1:21 PM
						Exactly, and also during my intensive care program that I studied from the US I have been faced to be a leadership with the team that I worked with and they brought you under stress in many, many like critical care area to show your leadership and they will evaluate your leadership at that time.
				3	WJL	7/11/2013 1:21 PM
						Yes, there was just an EMS proficient, an EMS management class and also an EMS research methodologist, you have to be a leader for a group of people and manage them to take their subject and write their papers about something specifically and you are the leader, you are the evaluator of the whole group.

Internals\\Interviews\\Interview #04

Yes 0.0258 4

				1	WJL	7/11/2013 1:36 PM
						There is in the university I was taking a lecture called EMS management so that introduced me to the leadership of emergency
				2	WJL	7/11/2013 1:36 PM
						I have taught this from experience with paramedics in the field so I have learned that a lot
				3	WJL	7/11/2013 1:39 PM
						So you learned from previous team leaders,

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

4 WJL 7/11/2013 1:39 PM

Yeah it is by the EMS management

Internals\\Interviews\\Interview #05

Yes 0.0292 3

1 WJL 7/11/2013 1:51 PM

A lot of this question is difficult to answer because I never learned anything about leadership before

2 WJL 7/11/2013 1:51 PM

Interviewer: So with your education, you do not remember a specific leadership course or lecture?

Interviewee: I never took any class about the leadership unfortunately.

3 WJL 7/11/2013 1:53 PM

Because you know dealing with some people they have experience and you try to see what they are doing and establish your own profession.

Internals\\Interviews\\Interview #06

Yes 0.0469 3

1 WJL 7/11/2013 3:12 PM

Actually our education was like clinically and theory, we don't touch leadership too much.

2 WJL 7/11/2013 3:14 PM

For me I have learned by observation, nobody like focus on leadership that is why I am asking to add some part of books to focus on leadership.

3 WJL 7/11/2013 3:15 PM

Yeah if I see like our manager or our supervisor do something good and I believe it is good that is observational, I learn it from him, I can deal with people like what this supervisor or this manager did before and it is like accumulating something like if you like something from this guy, something from this manager, something from even if it is EMT, you just good thing we can learn it from everybody and even the guys here collect the good thing and do it sometimes the people see something good and they don't do it.

Internals\\Interviews\\Interview #07

Yes 0.0651 13

1 WJL 7/11/2013 7:44 PM

No, ok, I mean there wasn't any such thing as leadership skills, I mean as a formal class,

2 WJL 7/11/2013 7:45 PM

I mean ok my EMS training for leadership came from individual mentors along the way.

3 WJL 7/11/2013 7:46 PM

but there was no formal system

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			4		WJL	7/11/2013 7:46 PM
		as I mentioned the two guys that were our paramedic program instructors and lab coordinators, Rich and Sal, both of those guys, it was a different kind of mentorship, it was that actually, because when we were in the ambulance they were the supervisors in the field so they could show up at a call and say no, no, no you have to do it this way, and then you know they would take you, you could ride with them and see all kinds of different calls, and then you know QI and working through problems with crews, and being with them and observing how they handled things and issues				
			5		WJL	7/11/2013 7:47 PM
		I think the first formal sense of training leadership in education was from Walt Stoy, he was the Program Director at the Center for Emergency Medicine and just I think working on his Master's at that point and he really took it to heart to try to develop really teach people how to teach, so I remember having some classes with him that we had to attend about like how people learn, what methods of teaching are there, what is Maslow's hierarchy and he was trying to take the teachers that were in the center and educate them to some educational philosophy and some systematic way of doing it, not just sort of like ok however you want to teach the class.				
			6		WJL	7/11/2013 7:49 PM
		Because the business side of it I learned from our family business, I didn't really learn it from the guys that I was working with at the paid ambulance company, I mean I already knew how to do the accounting and all that kinds of stuff,				
			7		WJL	7/11/2013 7:49 PM
		the skills in the field I think how to manage calls as like a crew chief from being with riding with Rich and Sal and watching them, but again it wasn't like they were trying to teach us how to do that.				
			8		WJL	7/11/2013 7:50 PM
		I mean some of what I brought to EMS I learned in the fire service because the fire service it was very structured, I mean you had your classes, we had to go to fire academy, if you wanted to be an officer you had to take this class, this class, this class, you know and so there were some of that understanding of how to manage an emergency and setting a goal and managing like a house fire you could translate into EMS and go ok it is not a house on fire but there is 10 patients so there is zoning and sectoring and these things all are kind of like a crossover between the two but again nothing directly on the EMS side was there in place at that time.				
			9		WJL	7/11/2013 7:52 PM
		Corporately when I was the Operations Director, again those kinds of skills, like I didn't know how to deal with the Board of Directors, I mean I had a, it was a public agency, I had a Board of Directors, I had a budget that I had to be accountable for, new equipment that needed to come, I mean ok how do I decide whether or not we should buy these new monitors, are pulse oxs really, we had no research education at all when we were going through our paramedic program, so I couldn't do a comparative study or go ok I didn't understand, all right let me take all these patients, see what the rate is of patients that actually need this piece of equipment against how much it was going to cost, and you know all those things that now are in a lot of the paramedic programs, it was just trial and error, ok do the budget this year, ok depreciation schedule says I need 20,000 in the bank, I put in the bank and hope for the best, so it was over time that I started to understand ok how can I quantify or qualify what I want equipment wise or staffing wise or all of those things and not simply looking at the ambulance service next door that just bought a \$350,000 rescue truck that is useless for anything but man it sure looks nice in the parade kind of situation				
		Well in the beginning by observation	10		WJL	7/11/2013 7:53 PM
			11		WJL	7/11/2013 7:53 PM
		now by seminars attending classes, taking some leadership things, you know, skills classes,				
			12		WJL	7/11/2013 7:53 PM
		and some of it from the business world because there is lots in the business world about leadership that can be applied to EMS but again it still specifically on the EMS side a bit thin				
			13		WJL	7/11/2013 8:38 PM
		So as for me you know developing as a leader it was just from like I said making those mistakes and then realizing that you know like well maybe they really think I am a fool, then trying to change something about that to become more and now on the far side, on this side where it is more I guess I know it sounds kind of crazy to say I see myself as a leader because I really don't see myself				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Internals\Interviews\Interview #08

Yes		0.0439	3
-----	--	--------	---

1	WJL	7/23/2013 9:30 AM
---	-----	-------------------

Yeah when I studied in the US we have like kind of one or two chapter that talking about the leadership that the future of the person who is going to be work as a leadership specifically future I remember like someone who is he is supposed to be a good training, he has good skill, and he will be able to manage the scene, the people as well, he could think in one part of moment about something to make a good decision.

2	WJL	7/12/2013 9:17 AM
---	-----	-------------------

For sure practice

3	WJL	7/12/2013 9:18 AM
---	-----	-------------------

I studied everything about the skill, I learned them, I practiced them and then I did them and someone who is like my supervisor he agreed that I made my skill in the right way and if there was a mistake he tell me where is my mistake, he correct me, he told me what is the right way to do something and after time I could do them easily and for sure other days there is proof that I did it in the right way, time after time, I am ok with my skill and comfortable you know

Internals\Interviews\Interview #09

Yes		0.0487	10
-----	--	--------	----

1	WJL	7/12/2013 10:28 AM
---	-----	--------------------

I was hired immediately with the Detroit fire department where I got my years of service there. The population of Detroit is approximately, at that time was approximately 1 million people and our call volume on the average was between 130 to 150,000 calls a year, a fast moving system, I worked on an average I did anywhere from 12 to 14 calls a 12-hour shift. Of course a 911 system 24 hours I am off spent in the State of Michigan and so that was how we worked, we worked three days on, four days off, four days on, three days off, basically like that. It was a great learning experience for me.

2	WJL	7/12/2013 10:05 AM
---	-----	--------------------

I have really had some good mentors

3	WJL	7/12/2013 10:07 AM
---	-----	--------------------

I have been blessed with having some really good mentors, some people who have acted as unofficial field training officers and unofficial management mentors. I have seen some great ones and I have some experienced some awful ones unfortunately but I don't blame the ones who were bad because it is up to the organization, I think it has a certain part to give their managers the specific tools needed to do the job.

4	WJL	7/12/2013 10:08 AM
---	-----	--------------------

I think there should be mentoring programs for people who are going to be managers so they get some time before they even become managers. I mean just like going to school to become a paramedic, you just don't jump in the field and learn to become a paramedic, you gain the knowledge first, the book knowledge, then you gain the practical knowledge, and then you go out to the field, you are supervised by someone and then you actually do the job, I think that needs to take place as well with practitioners who become managers.

5	WJL	7/12/2013 10:12 AM
---	-----	--------------------

Working with some of these mentors I saw some of their good qualities as manager and as leaders but it wasn't to say that I learned everything from them.

6	WJL	7/12/2013 10:12 AM
---	-----	--------------------

I earned a lot of what I know now through reading and through experimentation.

7	WJL	7/12/2013 10:14 AM
---	-----	--------------------

No, not specifically, I think it was more of an actions that were presented.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			8		WJL	7/12/2013 10:14 AM
		Research, yeah, doing research, I mean a lot of it is just not just reading, a lot of it more and more research, obviously you would know more or just as much information or even more than me on research. Research is a big deal, you know reading, you know you can just read anything to read, but I do a lot of research, a lot of article reading, pre-review articles, to make sure that I am abreast of what is current, what is not, and lately I have been getting into more of articles and issues that are not really put out there for the general public because a lot of what we read is positive a lot of times and I am starting to get into the area let's read about those things that are not positive that we can still draw benefit from, so I mean I have done a lot of reading but I think now at the point of my career, I have done more research than reading.				
			9		WJL	7/12/2013 10:23 AM
		I think a lot of my EMS leadership skills come back or come from my actual field experience you know even though we don't think about it when we are in the field				
			10		WJL	7/12/2013 10:35 AM
		Well a lot of it is OJT, on the job training				
Internals\Interviews\Interview #10						
		0.0639	13			
			1		WJL	7/12/2013 10:56 AM
		In EMT school I think it was touched on.				
			2		WJL	7/12/2013 10:57 AM
		We never really necessarily sat down and said, "Look this is the leadership qualities. This is what leadership is about."				
			3		WJL	7/12/2013 10:57 AM
		Before this I was in ROTC in high school and I had actually got sent to leadership camps and all that. I know the differences.				
			4		WJL	7/12/2013 10:58 AM
		Now the one caviat to that is with the foresters there was a class on leadership and fire line safety.				
			5		WJL	7/12/2013 10:58 AM
		but in the actual EMT it wasn't really touched on.				
			6		WJL	7/12/2013 11:04 AM
		From seeing these older guys that were there before me, my field training officers when I was brand new. Seeing my partners that have been on the job. Seeing how they act and do things.				
			7		WJL	7/12/2013 11:04 AM
		Seeing different ... respond to calls with fire departments and seeing how the captain gets things ordered.				
			8		WJL	7/12/2013 11:05 AM
		Also, too, the simulations I think are key, especially when you're new. I'd come in and there was one time when they brought shocking shells and they were on the ground. They had another EMT laying in the corner. I had to go in there and figure out what was going on, but those actually problem solving skills that made me step out of the box and think about things and think things through. Then I had to help of the older, FTO with a n older crew member there. I shouldn't say older, but the more experienced crew member helping me through it. That right there was a key example, I think, of leadership.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			9		WJL	7/12/2013 11:05 AM
			Well it helped to with the foresters. It's coming more structured. It's governmental so it's more military kind of. We had a chain of command in the private Anglo system, but it's nothing like governmental. In the governmental we had our squad leaders, we had our captains, and then we had the superintendent. We had all these people in between.			
			10		WJL	7/12/2013 11:13 AM
			That's something the fire service taught me a lot, too, was constantly be reevaluating, constantly look safety, where is your exit point? Where can you get to if X happens. Having an action plan in your head and constantly reevaluating it. That's something that's become more evolved in my career. I think that just deals with what we do.			
			11		WJL	7/12/2013 11:18 AM
			Also too with the forest service I did training like incident command. I am incident commander type five certified. I did a lot of stuff in there with leadership and all that. I think definitely my career has been unique and I fought a lot of different things as far as my career maybe differently than a lot of other people.			
			12		WJL	7/12/2013 11:18 AM
			I had that military training, the junior ROTC training in high school. I had that whole leadership thing going into it.			
			13		WJL	7/12/2013 11:18 AM
			I think that's why I'm so hardcore about integrity and all this stuff because those are core military values			

Internals\Interviews\Interview #11

Yes	0.0220	7
-----	--------	---

			1		WJL	7/13/2013 4:53 PM
			As far as EMS and leadership, I wouldn't say that I've had specific training just in EMS leadership.			
			2		WJL	7/13/2013 4:53 PM
			Most of my leadership was from the military. I went through Airman Leadership School which was just leadership principals, that was about 6 weeks. Then I went through the Non-Commissioned Officer Academy which that was another leadership school and that was around five weeks. Most of my leadership has been military based.			
			3		WJL	7/13/2013 4:54 PM
			It was on the military side which leadership's leadership.			
			4		WJL	7/13/2013 4:57 PM
			It's learned on the job type thing.			
			5		WJL	7/13/2013 4:59 PM
			learn part of my leadership skill within EMS like I said, there has been no EMS leadership training per say.			
			6		WJL	7/13/2013 4:59 PM
			Most of us, you learn on the job and often influenced by the person that taught you. When you start in to a new job, they'll say, "Well, this is the way we do it here, don't worry about the way it was done there."			
			7		WJL	7/13/2013 5:08 PM
			I would say that the leadership especially in my experience I started out in the military which is more of a dictatorship.			

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Internals\\Interviews\\Interview #12

Yes 0.0325 6

1 WJL 7/13/2013 5:44 PM

It's not taught actually.

2 WJL 7/13/2013 5:52 PM

Yeah. They are always saying that ... my teacher before, the Irish guy, kept telling me that if you're going to start working in the ambulance you have to take the leadership if no one does.

3 WJL 7/13/2013 5:53 PM

It's a lot of things especially inside the truck, inside the ambulance

4 WJL 7/13/2013 5:53 PM

That's one of the best thing that I've learned, that they showed me and now I'm showing it to my partner even though he's a paramedic, but he's still new.

5 WJL 7/13/2013 5:59 PM

I've learned it before in school so I'm just applying everything. It's just the way you talk or you work with your partner, and that's it. Most of things it's basic like you've learned it from the school and you're just applying it and then

6 WJL 7/13/2013 6:00 PM

It's like when you do something

Internals\\Interviews\\Interview #13

Yes 0.0196 2

1 WJL 7/13/2013 6:37 PM

Yeah. First you gotta assess, right? In every situation you gotta assess first. And then just do the right thing and address to the patient what he needs, what he needs, what his feelings are.

2 WJL 7/13/2013 6:39 PM

Leadership skills, you just work with your partner

Internals\\Interviews\\Interview #14

Yes 0.0430 47

1 WJL 7/14/2013 4:03 PM

he was a gentleman that saw potential. Six months, I was working there for six months and he was my partner. There's this gunnery sergeant who is my boss who is an EMT basic. He's going to be my partner and it's really intimidating being the medic who is the senior personnel that writes off "anything goes wrong, it's your fault" but your boss is the basic that is sitting there watching. It's kind of like you have to play the fence a little bit.

He saw the potential and we were partners for six months, and I came in to shift one day, he pulls me in the office and he says, "Congratulations, here's the keys." "What?" He says, the management, the Vice President and the station manager didn't want to let me know because they wanted to see how the gentleman did my interview, how his decision-making process panned out. They didn't tell me.

I was actually being trained to take his post, to take his position for six months because he was getting promoted.

2 WJL 7/14/2013 4:05 PM

I never took a class in leadership.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			3		WJL	7/14/2013 4:05 PM
						I did take a class when I was college, just when I got out of college for initial response to mass casualty, evaluating resources and that stuff.
			4		WJL	7/14/2013 4:05 PM
						As far as management classes, how to deal with personnel, who you need to handle with kid gloves, who you can actually yell at and the next day command and be fine. About different personalities you're dealing with, all this sort of stuff, I never took a class for.
			5		WJL	7/16/2013 7:15 PM
						I was in the EMS system when on-the-job training was what they call sink or swim.
			6		WJL	7/14/2013 4:23 PM
						got hired was to bring all this experience with us to help foster the department to be leaders and trainers for the people that were here but they don't have any experience behind it.
			7		WJL	7/14/2013 4:24 PM
						We had no idea what are we getting into except that they needed people to be leaders on the trucks to show the locals how to be professional.
			8		WJL	7/14/2013 4:35 PM
						During my career, no. Nothing was specific. I never took any formal training.
			9		WJL	7/14/2013 4:35 PM
						What my leadership skills were, basically handed down from people that I worked with, watching how people interact.
			10		WJL	7/14/2013 4:35 PM
						What my leadership skills were, basically handed down from people that I worked with, watching how people interact.
			11		WJL	7/14/2013 4:37 PM
						No. Not when I was coming up.
			12		WJL	7/14/2013 5:13 PM
						Unfortunately, as far as my leadership skills I was way behind on the curve. Not having any of the classes, not having any of the management training or anything like that, even when I became a manager, never got sent to any classes.
			13		WJL	7/14/2013 5:14 PM
						A lot of my experience has been trial and error. Sometimes it works, sometimes it doesn't.
			14		WJL	7/14/2013 5:15 PM
						Just through the school of hard knocks.
			15		WJL	7/14/2013 5:15 PM
						Trial and error.
			16		WJL	7/14/2013 5:16 PM
						services that I worked for were fairly small so you can get away with a lot of trial and error.
			17		WJL	7/14/2013 5:19 PM
						He says if I'm getting a lot of resistance about changing these five things then I'm okay with being the asshole because these things got to change. I'm okay with it.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	diplomacy		18		WJL	7/14/2013 5:19 PM
	It's taught me a level of being humble.		19		WJL	7/14/2013 5:20 PM
	research		20		WJL	7/14/2013 5:20 PM
	We wrote up a proposal, sent it to management, sent it to the physician, etc.		21		WJL	7/14/2013 5:21 PM
	frame of mind, you can't take things very personally.		22		WJL	7/14/2013 5:26 PM
	A good manager will find a way to convey that without being, bad side, aggressive, mean, demeaning, reactive.		23		WJL	7/14/2013 5:26 PM
	proactive		24		WJL	7/14/2013 5:26 PM
	proactive		25		WJL	7/14/2013 5:26 PM
	proactive		26		WJL	7/14/2013 5:27 PM
	Basically we've gone in in the past to talk to people and they acknowledge your existence but they don't give you, you don't have that sense of them actually listening.		27		WJL	7/14/2013 5:27 PM
	honest		28		WJL	7/14/2013 5:28 PM
	moral code		29		WJL	7/14/2013 5:29 PM
	I don't care if you were hit by a car because you were bagging out here on the road or that you are a member of the royal family and you have a fucking hangnail, I'm going to treat you the same. That's my moral code.		30		WJL	7/14/2013 5:30 PM
	Because of poor leadership. Leadership has turned a lot of good people to be resentful. They don't enjoy coming to work anymore, some of them have changed their mod and their drive to do the best they can because now they are just here for a paycheck.		31		WJL	7/14/2013 5:32 PM
	Your manager is supposed to take care of their employees, do what you can to take care of your employees and treat them all as equals.		32		WJL	7/14/2013 5:33 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			33		WJL	7/14/2013 5:34 PM
		These are prime examples of really undermining, shitty management because he's not treating everybody the same.				
			34		WJL	7/14/2013 5:36 PM
		Follow through				
			35		WJL	7/14/2013 5:38 PM
		That goes along with goal-driven, they have a goal, let's get to it.				
			36		WJL	7/14/2013 5:38 PM
		Always moving forward. I love managers that always move forward.				
			37		WJL	7/14/2013 5:39 PM
		A level of commitment would be a big thing for me.				
			38		WJL	7/14/2013 5:39 PM
		committed to the job.				
			39		WJL	7/14/2013 5:41 PM
		In reference to leadership the ability to be a pre-thinker would be one thing. One of the things that I've learned in EMS is not every call is the same. Some things change. If you cannot adjust to include the new information into what's going on in your immediate situation then your leadership ability can be questioned.				
			40		WJL	7/14/2013 5:41 PM
		Critical thinking				
			41		WJL	7/14/2013 5:43 PM
		patience				
			42		WJL	7/14/2013 5:44 PM
		Unfortunately never taking a leadership class, I'm not really sure what they entail.				
			43		WJL	7/14/2013 5:44 PM
		Critical thinking				
			44		WJL	7/14/2013 5:45 PM
		Patience				
			45		WJL	7/14/2013 5:45 PM
		Mutual respect				
			46		WJL	7/14/2013 5:45 PM
		Confidence. Confidence would be a pretty good thing.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

47 WJL 7/14/2013 5:46 PM

It's kind of hard to be taught to be a leader unless you have one very important thing and that is very good guidance. In order for you to be a very good leader you have to be guided by a good leader that can show you or can teach you how to be a decent leader.

Internals\\Interviews\\Interview #15

Yes 0.0477 42

1 WJL 7/14/2013 5:59 PM

It's kind of on-the-job training is what it is because you don't really ever know how you're going to handle that situation until you're faced with it and then at that point, it's up to you as a person to re-evaluate.

2 WJL 7/14/2013 6:01 PM

Where we come from in Maine most of our police officers are either fire fighters and police officers or they are police officers and EMS professionals. Our fire fighters usually hold more than one of those two jobs, and our paramedics and EMT's are also either; like myself or my husband, are fire fighters and EMS professionals.

3 WJL 7/14/2013 6:00 PM

Where we come from in Maine most of our police officers are either fire fighters and police officers or they are police officers and EMS professionals. Our fire fighters usually hold more than one of those two jobs, and our paramedics and EMT's are also either; like myself or my husband, are fire fighters and EMS professionals.

4 WJL 7/14/2013 6:18 PM

I think in my basic EMT class, yes leadership skills are discussed and taught because it is a chapter in the basic EMT class. It kind of falls under the operations and management chapter in the book, and at that point, basically what they teach you is they teach you radio communications, and how to communicate with dispatch, and the police, and the fire, and things like that.

5 WJL 7/14/2013 6:18 PM

It's a very basic leadership skills that they teach you.

6 WJL 7/14/2013 6:18 PM

My personal opinion is that although you can take a lot of classes, and go to conferences, and things that build leadership skills, I think that more than anything else, leadership skills come from experience.

7 WJL 7/14/2013 6:18 PM

I think that on a whole, the more experiences you have where you're put in a position of having to make a decision, strengthens your leadership skills everyday of your life. In all of us, whether it's in our professional life or our personal life raising children and what have you, learn leadership skills.

8 WJL 7/14/2013 6:19 PM

Sometimes leadership comes from experience and not just what you can learn from the book and what you can learn from a conference, or a class, or a speaker. I feel very strongly that experience is probably the best educator in most every aspect. So in regard to my training, or EMS training, in regard to leadership, I think most of it comes through experience.

9 WJL 7/14/2013 6:20 PM

Again, it's a trial and error.

10 WJL 7/14/2013 6:20 PM

I think primarily, not 100%, but yes I think primarily experience teaches us leadership more than anything else does.

11 WJL 7/14/2013 6:20 PM

Yes I had. Like I said, I did a lot of ride time with the ambulance department whenever I was taking my EMS classes.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			12		WJL	7/14/2013 6:23 PM
			Yes I had. Like I said, I did a lot of ride time with the ambulance department whenever I was taking my EMS classes.			
			13		WJL	7/14/2013 6:24 PM
			That is a responsibility that you have and as a supervisor, the supervisor was responsible to make sure that the crews had checked their trucks. Just like we do here, we have a check sheet; same thing in the states. When I was first doing my ride time, I would come in in the morning, I would find out which crew, and basically what happens is when you're doing ride time, you come in and sit down, and the first crew that goes on a call, you jump on the truck with them.			
			14		WJL	7/14/2013 6:24 PM
			So you really get to see a lot. You learn a lot. Those experiences happen while you're in your training. But, again, remember that I was only required 8 hours of ride time versus my doing as much as I possibly could. A lot of my leadership skills came from watching and observing.			
			15		WJL	7/14/2013 6:21 PM
			A lot of my leadership skills came from watching and observing.			
			16		WJL	7/14/2013 6:22 PM
			I got to really see a lot of different aspects of how the leadership moves up the chain. I watched and I observed, and again, for me experience was the biggest trainer.			
			17		WJL	7/14/2013 6:23 PM
			I would go and I would learn from the person who was teaching the class how they were a leader to the class.			
			18		WJL	7/14/2013 6:23 PM
			I would go and I would learn from the person who was teaching the class how they were a leader to the class.			
			19		WJL	7/14/2013 6:25 PM
			The more I observed, the more I wanted to observe more			
			20		WJL	7/14/2013 6:26 PM
			You learn new skills and you learn new ways to adapt yourself. Of course like I've said, I always carry the way that Arlene taught me whenever I started helping out and teaching, and then teaching classes myself, I wanted it to be the same because I saw the benefit of it in the beginning. I carried that through with me and the people that I helped with the class were basically the same way.			
			21		WJL	7/14/2013 6:29 PM
			personal experiences			
			22		WJL	7/14/2013 6:37 PM
			Mostly by example.			
			23		WJL	7/14/2013 6:37 PM
			Mostly by example. I think that in watching people who were in charge and learning from them, I started out as a basic EMT.			
			24		WJL	7/14/2013 6:37 PM
			I didn't know anything except what I have learned until I started experiencing for myself. So primarily at that point in time, I learned from example.			
			25		WJL	7/14/2013 6:37 PM
			I didn't know anything except what I have learned until I started experiencing for myself. So primarily at that point in time, I learned from example.			

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				26	WJL	7/14/2013 6:31 PM
						You kind of learn that this is not what I want to do.
				27	WJL	7/14/2013 6:32 PM
						You kind of learn that this is not what I want to do.
				28	WJL	7/14/2013 7:09 PM
						I've learned from a lot of people what to do, but I've also learned what not to do.
				29	WJL	7/14/2013 7:09 PM
						I've learned from other people's mistakes.
				30	WJL	7/14/2013 7:10 PM
						my leadership skills, as far as my profession goes; I think that they have come from paying attention and learning.
				31	WJL	7/14/2013 7:11 PM
						So I think primarily it has been experience based.
				32	WJL	7/14/2013 7:12 PM
						Yes and paying attention, and recognizing what works and what doesn't.
				33	WJL	7/14/2013 7:14 PM
						They teach you the basics, but really experience is what teaches you the reality of it.
				34	WJL	7/14/2013 7:30 PM
						Like, when we have our new medics come on board, our new medics are generally paired up with seasoned people.
				35	WJL	7/14/2013 10:08 PM
						experience
				36	WJL	7/14/2013 10:09 PM
						experience
				37	WJL	7/14/2013 10:12 PM
						I think that leadership is something that is more as people progress in EMS and they start to move up, they tend to either naturally move on to take a leadership role or they don't.
				38	WJL	7/14/2013 10:12 PM
						, I think that team billing or the use of team building skills has played a huge piece in my ability to adapt to situations wherever I'm at.
				39	WJL	7/14/2013 10:12 PM
						Team building skills do that.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			40		WJL	7/14/2013 10:13 PM
<p>Team building skills do that. Working through scenarios. Whenever you put two people together and you give them a scenario and you tell them, "Okay, how are you going to do this? What are you guys going to do?" Two people start talking about, "Well, we can try this." Some of the team building skills was giving them a scenario and they have to physically work through and build this project. One will be like, "Okay, well let's try this." The other will be like, "No, no, no. That's not going to work." You see them give and take a little bit. In the beginning people are kind of like, "No, no, no." Then, they start saying, "Okay, we'll try it and we'll see." They'll be like, "Oh okay, well wait a minute. That's good. It's not working yet, but maybe if we do this." You see them start to work together and their minds just start to pull together.</p>						
			41		WJL	7/14/2013 10:22 PM
<p>I kind of fall back to the leader piece is something, I think, something that comes down the road.</p>						
			42		WJL	7/14/2013 10:23 PM
<p>If you're talking about leadership and moving up and being in a supervisory or a captain role or a teaching role, I think that that just comes with experience and with desire from the person. I think that that's something that just kind of ... it falls in line in your career, as you process in your career. The leadership piece more is a chain of events and something that progresses.</p>						
<p>Internals\Interviews\Interview #16</p>						
Yes		0.0483	10			
			1		WJL	7/13/2013 6:52 PM
<p>I believe in the paramedic program, the best thing they did for us with leadership skills was they just threw us into a scenario where we were the one in charge.</p>						
			2		WJL	7/13/2013 6:53 PM
<p>As a paramedic on scene, usually in the areas we worked in, you were the only ALS provider amongst seven or eight people.</p>						
			3		WJL	7/13/2013 6:54 PM
<p>my preceptor would be like, "Okay, when we get on the scene, I'm going to step back and you just take the role. If you start to sink I will catch you." I think some of the best moments where I learned the best leadership role for what I knew was when yeah, they caught me if I started to go downhill.</p>						
			4		WJL	7/13/2013 6:56 PM
<p>What I recall, not in depth. Not outside of the aspect of you're the paramedic.</p>						
			5		WJL	7/13/2013 6:57 PM
<p>We didn't go to any sort of management or leadership training courses. I think just what we did was what they consisted of it.</p>						
			6		WJL	7/13/2013 6:57 PM
<p>We got scored on our leadership abilities and our ability to take the team leader role and all that.</p>						
			7		WJL	7/13/2013 6:56 PM
<p>To my knowledge, I don't think we actually had any leadership classes.</p>						
			8		WJL	7/13/2013 7:00 PM
<p>Like I said, as a paramedic we're put into a situation where like I said we're the sole decision maker on the team.</p>						
			9		WJL	7/13/2013 7:01 PM
<p>Like I said, we weren't given specific leadership courses.</p>						

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

10 WJL 7/13/2013 7:08 PM

That actually has never changed because that's what I was raised on in a military family. I came into what looked like a paramilitary system and that's what I expected.

Internals\Interviews\Interview #17

Yes 0.0469 4

1 WJL 7/13/2013 7:19 PM

He's been my partner almost every shift so that's how I learned the leadership skills.

2 WJL 7/13/2013 7:20 PM

Okay, back when, during my first year this guy who actually taught me a lot not just being an EMT but being a good leader and everything.

3 WJL 7/13/2013 7:21 PM

Well, okay, this is fun. Good example, I would say back home when I used to work with the police, just because they are cops and they are strict about everything on what you do, what time that you came in, what time did you went home, what skills did you do to this patient, so everything is just flat out, strict. Yeah, I would say those are the very good example that I have.

4 WJL 7/13/2013 7:24 PM

From working with the cops from being, let's say, from being that high and it just went downhill, it just went downhill. Just because of people not following their orders instead of following they complain. Well back home we have a rule that states, "You should obey first before you complain."

Internals\Interviews\Interview #18

Yes 0.0786 12

1 WJL 7/13/2013 7:28 PM

As I start my experience as EMS provider in Doha, there's no courses or no special training how to lead.

2 WJL 7/13/2013 7:29 PM

It's just going through the skills itself. They practice us on the skills stations and in the field.

3 WJL 7/13/2013 7:29 PM

It's just going through the skills itself. They practice us on the skills stations and in the field.

4 WJL 7/13/2013 7:29 PM

By this way we get some experience how to lead, but actually, there's no special courses or training how to lead until that time.

5 WJL 7/13/2013 7:30 PM

No special training in leadership, even here.

6 WJL 7/13/2013 7:30 PM

Yes. Through the practice the evaluators sometimes they have comments sheet, they write it they talk about you, how do you behave, how do you lead, how do you ... this guy will be good as leadership, for example, EMT leader. That's it, and later they will give some advices for you how to ... but no special training about the leadership actually.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				7	WJL	7/13/2013 7:30 PM
						but no special training about the leadership actually.
				8	WJL	7/13/2013 7:34 PM
						I think I answered this question before, because I told you there is ... I didn't attend, I didn't hear about special training course even in training center in Hamad Corporation in Doha for EMS training.
				9	WJL	7/13/2013 7:35 PM
						Our leadership is ... we gain it during skills practice experience, actually.
				10	WJL	7/13/2013 7:35 PM
						Day by day in the field, we build our experience how to lead, in the field. I think ten years enough as EMS provider should be enough for me to know how to lead, especially in the field.
				11	WJL	7/13/2013 7:35 PM
						It's all experience, yes. For me and my colleagues actually, our leadership experience, we build it by our own performance in the field, how to do it.
				12	WJL	7/23/2013 9:30 AM
						Some books are good for our work as administrator. Many books started to discuss the EMS provider care, they talk about ethicals, they talk about behavioral, they talk about ... Some books, we need it, it gives us idea of how to lead, how to deal with the patient, how to lead the bystanders, sometimes how to lead your partners.
						Interviewer: Do you have any examples of those books, or the books that you're talking about?
						Interviewee: The first book we read was Mosby EMT book.

Internals\\Interviews\\Interview #19

Yes	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	0.0806	12			
			1	WJL	7/13/2013 8:14 PM
					I start my career as a military EMT
			2	WJL	7/13/2013 8:14 PM
					I finished the training, then they assigned me apparently as an EMT what they call it. It's an officer. It's a middle rank.
			3	WJL	7/13/2013 8:16 PM
					There is nothing more than just the thought.
			4	WJL	7/13/2013 8:16 PM
					But in the college, we get what they call EMS management, which is more concentrating on the leadership.
			5	WJL	7/13/2013 8:16 PM
					I think most of the leaderships that I got skills I get from the military side, because when I came to civilian, I was never taught any courses or materials in leaderships, but the military itself.
			6	WJL	7/13/2013 8:16 PM
					The military training gives you some leadership and honestly to this moment, I think that in my personality is that you can't find a military side to this.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				7	WJL	7/13/2013 8:17 PM
				<p>Stuff like for example in the emergency management, how to achieve the professionalism on how to be proficient as in paramedic and how you deal with colleagues, with other health providers, with your patient. I think all are contributed to the leadership.</p>		
				8	WJL	7/13/2013 8:17 PM
				<p>Also, there was a part in disaster which is they call it emergency management or incident plan.</p>		
				9	WJL	7/13/2013 8:18 PM
				<p>The curriculum always try to emphasis these leaders. The definition of the paramedic, one of the first definitions I read in the curriculum or in the textbook. The definition of the paramedic was, paramedic is the highest level in the pre-hospital medical services or medical care. These things I think unconsciously, it's brought in my mind that you have some leadership. You have to get the responsibility.</p>		
				10	WJL	7/23/2013 9:30 AM
				<p>Okay, I told you that plus what's in the textbooks,</p>		
				11	WJL	7/13/2013 8:26 PM
				<p>what's in the field itself.</p>		
				12	WJL	7/13/2013 8:28 PM
				<p>Plus, I think the master program has a great deal of leadership. That's maybe I forget to mention because the program is training specifically for healthcare emergency managers which serves as a manager which is like to manage or to be a manager in the emergency situation.</p>		

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Appendix D: Findings – Leadership Roles in EMS

Node Summary

Node Details

Node Summary

Dissertation

8/6/2013 8:59 PM

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Node

Nickname: Nodes\\Leadership Roles

Classification:

Aggregated: Yes

Document	17	40	490	40	
----------	----	----	-----	----	--

Nickname: Nodes\\Leadership Roles\\Dispatcher

Classification:

Aggregated: No

Document	1	1	32	1	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Roles\\EMT

Classification:

Aggregated: No

Document	3	3	14	3	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Roles\\Instructor

Classification:

Aggregated: No

Document	2	2	71	2	
----------	---	---	----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Roles\\Management and or Administration

Classification:

Aggregated: No

Document	10	14	155	14	
----------	----	----	-----	----	--

Nickname: Nodes\\Leadership Roles\\Medical Director or Phycian

Classification:

Aggregated: No

Document	4	4	72	4	
----------	---	---	----	---	--

Coding Summary By Node

Dissertation

8/6/2013 8:54 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Node

Nodes\\Leadership Roles

Document

Internals\\Interviews\\Interview #01

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
Yes		0.0029	2	1	WJL	7/16/2013 11:25 AM
paramedics						
				2	WJL	7/16/2013 11:26 AM
in the field I think most of the paramedics there they are good leaders for the teams						

Internals\\Interviews\\Interview #02

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
Yes		0.0009	1	1	WJL	7/16/2013 11:27 AM
He was head of EMS						

Internals\\Interviews\\Interview #04

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
Yes		0.0085	2	1	WJL	7/16/2013 11:28 AM
Oh they are EMS supervisor, EMS manager, the head of EMS						
				2	WJL	7/16/2013 11:28 AM
The management and the supervision yes						

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Internals\\Interviews\\Interview #06

Yes		0.0038	3			
				1	WJL	7/23/2013 8:48 PM
Some of them paramedic						
				2	WJL	7/16/2013 11:29 AM
manager and supervisor						
				3	WJL	7/23/2013 8:48 PM
as well as doctor.						

Internals\\Interviews\\Interview #07

Yes		0.0054	3			
				1	WJL	7/16/2013 11:31 AM
training academy, Dr. Samir and Dr. Ahmin because they are really, they are well educated in EMS, very well educated, both of them humbled themselves and actually took the EMT class so they could take the EMT national registry exam, these are two physicians that are board certified in Emergency Medicine in their countries,						
				2	WJL	7/16/2013 11:31 AM
training academy, Dr. Samir and Dr. Ahmin because they are really, they are well educated in EMS, very well educated, both of them humbled themselves and actually took the EMT class so they could take the EMT national registry exam, these are two physicians that are board certified in Emergency Medicine in their countries,						
				3	WJL	7/16/2013 11:31 AM
there are some EMTs in the field that are good EMTs						

Internals\\Interviews\\Interview #08

Yes		0.0004	1			
				1	WJL	7/16/2013 11:32 AM
EMT basic						

Internals\\Interviews\\Interview #09

Yes		0.0026	3			
				1	WJL	7/23/2013 8:48 PM
I have experienced some good leaders within the organization but they are not necessarily in management						
				2	WJL	7/16/2013 11:40 AM
management but not at the executive level						

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

3 WJL 7/16/2013 11:41 AM

mid-level managers

Internals\Interviews\Interview #10

Yes 0.0074 3

1 WJL 7/16/2013 11:44 AM

shift supervisors, they make sure everything goes well, fine.

2 WJL 7/16/2013 11:44 AM

Then they took away the set team leaders. Now they just assign random people to be a shift supervisor.

3 WJL 7/16/2013 11:45 AM

Now our operations manager, which he does a great job, I mean everyone has got room for improvement, what not, but he does a great job.

Internals\Interviews\Interview #11

Yes 0.0014 2

1 WJL 7/16/2013 11:46 AM

managers

2 WJL 7/23/2013 9:31 PM

then it moves on to medical director and to Dr. Butt.

Internals\Interviews\Interview #12

Yes 0.0088 2

1 WJL 7/16/2013 11:49 AM

team leader each shift

2 WJL 7/16/2013 12:17 PM

For example, this group, they're going to handle the supplies and everything; and this group, they're going to handle equipment, because I'm one of the equipment team.

Internals\Interviews\Interview #13

Yes 0.0159 2

1 WJL 7/16/2013 11:50 AM

Their role as our team leader

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

2 WJL 7/16/2013 12:18 PM

He gives it out, he dispatch it to every one of us equally. If this is his best friend doing work, and he's the one dispatching, he disseminate out the calls equally.

Internals\\Interviews\\Interview #14

Yes 0.0005 3

1 WJL 7/16/2013 11:51 AM

managers

2 WJL 7/16/2013 11:53 AM

Our team leaders are really chaotic right now

3 WJL 7/16/2013 11:54 AM

team leader

Internals\\Interviews\\Interview #15

Yes 0.0050 6

1 WJL 7/16/2013 12:24 PM

Arlene was a very good leader. She was a strong leader, as far as my educator goes.

2 WJL 7/16/2013 12:20 PM

I have my boss back home, Dean, who I've been with since I started my EMS career. Dean and I have gone head to head on a few things. One thing about Dean is that he's called me on the carpet a couple of times for things. I actually had administrative leave at one point, for something that I was accused of.

3 WJL 7/16/2013 12:21 PM

Dean has been a manager. He is a captain of the fire department, full time.

4 WJL 7/16/2013 12:21 PM

shift leaders

5 WJL 7/16/2013 12:21 PM

we have assistant manager and manager.

6 WJL 7/16/2013 12:22 PM

Team leader is really the highest level that you can go, here in this department. There's not much room for advancement above and beyond that.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
Internals\Interviews\Interview #16						
Yes		0.0008	1			
				1	WJL	7/16/2013 12:25 PM
	operations team leader					
Internals\Interviews\Interview #17						
Yes		0.0022	4			
				1	WJL	7/16/2013 12:26 PM
	team leaders					
				2	WJL	7/16/2013 12:26 PM
	team leaders					
				3	WJL	7/16/2013 12:27 PM
	regular medics					
				4	WJL	7/16/2013 12:27 PM
	EMTs					
Internals\Interviews\Interview #18						
Yes		0.0009	1			
				1	WJL	7/16/2013 12:28 PM
	our medical supervisors					
Internals\Interviews\Interview #19						
Yes		0.0012	1			
				1	WJL	7/16/2013 12:29 PM
	one of them was my director.					

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Appendix E: Findings – Leadership Skills, Qualities, and Characteristics

Node Summary

Node Details

Node Summary

Dissertation

8/6/2013 9:01 PM

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Node

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities

Classification:

Aggregated: Yes

Document	19	425	10,905	447
----------	----	-----	--------	-----

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Communication

Classification:

Aggregated: Yes

Document	14	61	1,629	69
----------	----	----	-------	----

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Communication\\Communicate with other departments

Classification:

Aggregated: No

Document	2	2	35	2
----------	---	---	----	---

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Communication\\Listen

Classification:

Aggregated: No

Document	6	17	224	17
----------	---	----	-----	----

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Empower Encourage

Classification:

Aggregated: Yes

Document	8	23	689	23
----------	---	----	-----	----

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Empower Encourage\Trust

Classification:

Aggregated: No

Document	5	11	348	11
----------	---	----	-----	----

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Interpersonal\Compassion

Classification:

Aggregated: No

Document	4	6	142	6
----------	---	---	-----	---

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Interpersonal\Confident

Classification:

Aggregated: No

Document	4	10	216	10
----------	---	----	-----	----

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Interpersonal\Empathetic

Classification:

Aggregated: No

Document	1	1	28	3
----------	---	---	----	---

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Interpersonal\\Honest

Classification:

Aggregated: No

Document	4	8	53	8	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Interpersonal\\Humility

Classification:

Aggregated: No

Document	4	11	178	11	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Interpersonal\\Integrity and Honor

Classification:

Aggregated: No

Document	6	22	427	22	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Interpersonal\\Open to feedback

Classification:

Aggregated: No

Document	6	9	236	9	
----------	---	---	-----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Interpersonal\\Patience

Classification:

Aggregated: Yes

Document	4	9	53	9	
----------	---	---	----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Interpersonal\\Patience\\Self-Control

Classification:

Aggregated: No

Document	1	4	23	4	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Intrapersonal

Classification:

Aggregated: No

Document	7	22	963	23	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Problem Solving

Classification:

Aggregated: Yes

Document	14	43	952	43	
----------	----	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Problem Solving\\Collaborate

Classification:

Aggregated: No

Document	1	1	6	1	
----------	---	---	---	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Problem Solving\\Compromise

Classification:

Aggregated: No

Document	2	2	62	2	
----------	---	---	----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Problem Solving\\Conflict Resolution Classification: Aggregated: No					
Document	5	7	115	7	
Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Problem Solving\\Decision Making Classification: Aggregated: No					
Document	6	8	79	8	
Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Problem Solving\\Negotiate Classification: Aggregated: No					
Document	1	2	106	2	
Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional Classification: Aggregated: Yes					
Document	19	200	5,339	211	
Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Able to work under stress Classification: Aggregated: No					
Document	4	5	110	5	

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Able to work under stress\\Able to adapt

Classification:

Aggregated: No

Document	3	10	262	11	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Able to work under stress\\Critical Thinking

Classification:

Aggregated: No

Document	5	10	217	11	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative

Classification:

Aggregated: No

Document	1	1	2	1	
----------	---	---	---	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Budget

Classification:

Aggregated: No

Document	1	1	36	1	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Disciplinary

Classification:

Aggregated: No

Document	3	4	159	5	
----------	---	---	-----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Evaluation

Classification:

Aggregated: No

Document	3	5	510	6	
----------	---	---	-----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Manage People

Classification:

Aggregated: No

Document	5	8	115	8	
----------	---	---	-----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Manage People\\Looks after staff

Classification:

Aggregated: No

Document	7	11	378	12	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Organized

Classification:

Aggregated: No

Document	1	1	1	1	
----------	---	---	---	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Paperwork

Classification:

Aggregated: No

Document	2	2	14	2	
----------	---	---	----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Administrative\\Schedule

Classification:

Aggregated: No

Document	1	1	70	1	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Apperance

Classification:

Aggregated: No

Document	2	2	82	2	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Authoritative

Classification:

Aggregated: No

Document	4	8	191	9	
----------	---	---	-----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Avoid Tunnel Vision

Classification:

Aggregated: No

Document	4	7	334	9	
----------	---	---	-----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Confidential

Classification:

Aggregated: No

Document	1	1	5	1	
----------	---	---	---	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Educated

Classification:

Aggregated: Yes

Document	3	7	245	7
----------	---	---	-----	---

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Educated\\Research

Classification:

Aggregated: No

Document	2	4	18	4
----------	---	---	----	---

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Experienced

Classification:

Aggregated: No

Document	4	5	189	5
----------	---	---	-----	---

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Fair or Diplomatic

Classification:

Aggregated: No

Document	8	21	428	21
----------	---	----	-----	----

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Flexible

Classification:

Aggregated: No

Document	4	6	139	6
----------	---	---	-----	---

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Lead by example

Classification:

Aggregated: No

Document	12	31	976	31	
----------	----	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Personal vs. Professional

Classification:

Aggregated: No

Document	3	13	591	15	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Proactive - Change Agents

Classification:

Aggregated: No

Document	6	11	314	11	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Proactive - Change Agents\\Foresight

Classification:

Aggregated: No

Document	1	5	19	5	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Quality

Classification:

Aggregated: No

Document	2	3	79	3	
----------	---	---	----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Respect

Classification:

Aggregated: No

Document	2	11	192	11	
----------	---	----	-----	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Strong EMS Skills, Focus on Patient

Classification:

Aggregated: No

Document	13	32	1,113	38	
----------	----	----	-------	----	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Teamwork and Team Building

Classification:

Aggregated: No

Document	4	8	86	8	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Time Management

Classification:

Aggregated: No

Document	2	4	21	4	
----------	---	---	----	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\\Professional\\Touchable

Classification:

Aggregated: No

Document	2	3	95	3	
----------	---	---	----	---	--

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Professional\Transparency

Classification:

Aggregated: No

Document	2	4	9	4	
----------	---	---	---	---	--

Nickname: Nodes\\Leadership Skill(s), Characteristics and or Qualities\Professional\Transparency\Open

Classification:

Aggregated: No

Document	1	1	2	1	
----------	---	---	---	---	--

Coding Summary By Node

Dissertation

8/6/2013 8:54 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Node

Nodes\\Leadership Skill(s), Characteristics and or Qualities

Document

Internals\\Interviews\\Interview #01

Yes	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On	
	0.0573	13	1	WJL	7/11/2013 11:03 AM	
you have to gain the trust of all of your colleagues and especially of the guys below you or you know the lower rank to use the military term for this, I mean you just have to gain their trust and try to make your decisions understand when there is no stress around you for the moment of life on the station and for the symptom calls or whatever that they would just trust you and don't argue with you about any decision that you will do like in a critical case or mass casualty incident or something						
			2	WJL	7/11/2013 11:06 AM	
I mean yeah first of all if somebody wants to make, wants to be a leader, he needs to know his stuff.						
			3	WJL	7/11/2013 11:06 AM	
He needs to be professional.						
			4	WJL	7/11/2013 11:06 AM	
he at least should be a good paramedic so you don't doubt his professional skills so that is the first important point I think.						
			5	WJL	7/11/2013 11:07 AM	
And of course you somehow need to trust him otherwise you will not respect his decisions and you will just ask and doubt every of his decisions so I think this is also very important that you somehow gains a little trust with every co-worker.						
			6	WJL	7/16/2013 4:46 PM	
Interviewee: I want to say one thing important point left, I mean these guys also like you know they need to like be empathic for others						
Interviewer: Empathic						
			7	WJL	7/16/2013 4:45 PM	
Yeah and also they yeah they need to know how the others work from inside to deal with them directly. This is I think if he doesn't have this he wouldn't obtain the trust and the time in between so I think it fits together with the second point.						
			8	WJL	7/11/2013 11:22 AM	
I mean still coming back to the important needs you know you have to gain your trust for your co-workers before otherwise they will just out any of your decisions						
			9	WJL	7/11/2013 11:22 AM	
and of course everything that you decide has to be like to professional skills						

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				10	WJL	7/11/2013 11:22 AM
I mean you need to gain the trust of the guys because otherwise they would just do yeah they would doubt your decisions						
				11	WJL	7/11/2013 11:23 AM
Of course the leader has to be the one that most of the guys trust otherwise it won't work						
				12	WJL	7/11/2013 11:24 AM
so you need to be a good professional one						
				13	WJL	7/11/2013 11:25 AM
you still need the trust of your co-workers						

Internals\\Interviews\\Interview #02

Yes		0.0403	5			
				1	WJL	7/11/2013 12:46 PM
Interviewer: So as a provider you have had to learn how to decide which patients were critical, which ones needed to be transported and as he had said how to run a call, how to lead the team to get the patient from the scene to the hospital.						
Interviewee: Yes						
				2	WJL	7/11/2013 12:49 PM
you have to be a good communicator						
				3	WJL	7/11/2013 12:53 PM
Communication skills say they can say the important things						
Interviewer: Can you say a little bit more about that, what kind of communication skills?						
Interviewee: Like how can you manage any problem with your stuff, have someone on your team have problem, how you can manage it if your skills like psychological things I think it will be good.						
				4	WJL	7/11/2013 12:55 PM
so being able to solve problems as they come up, not make problems worse						
				5	WJL	7/11/2013 12:56 PM
you said something about able to look up to him, want to be him type of things						

Internals\\Interviews\\Interview #03

Yes		0.1397	12			
				1	WJL	7/16/2013 4:15 PM
I learned how to work under stress						
				2	WJL	7/11/2013 1:23 PM
I learned communication skills						

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				3	WJL	7/11/2013 1:23 PM
	medical communication skills					
				4	WJL	7/11/2013 1:24 PM
	how to be professional in your management					
				5	WJL	7/11/2013 1:24 PM
	So how to fix problems by providing a good like how to solve their problem and give them very good feedback about yourself and about their problem, like advising them to be in this situation so they can next time fix it without your intervention.					
				6	WJL	7/11/2013 1:25 PM
	In the United States, I learned from one professor, his name is Danny Miller and also Dr. Sandy, I saw them like the way they act in the class and in the field, I really admire them to be, I want to be one of them, or like them, one day					
				7	WJL	7/11/2013 1:25 PM
	really excellent leaders by their communications, by their orders, and their commands.					
				8	WJL	7/11/2013 1:26 PM
	Medical Director for the EMS program here in KFMC. He is an excellent guy, it doesn't matter if you work in the EMS or other department, he can help you with everyone. He suggests many things to you. He guide you to the professional way and teach you how to be a good leader in certain situations. He relieve you from the stress you are around by like listening to you and take the whole stress that you have and then advise you to the good things and sometimes give you a break to go home and sleep and think about it and come back give you comment about the things that you have done or not and feed you with good advice.					
				9	WJL	7/11/2013 1:29 PM
	I want to be like that person by showing me an excellent leadership so in the future I will just follow his steps and learn from his step by fixing problems you know take a good decisions in the right times and lead me to the good things.					
				10	WJL	7/11/2013 1:30 PM
	he will generally fix my problem without blaming me in something, relieve the pain that I have and fix the problem.					
				11	WJL	7/11/2013 1:30 PM
	I expect from him high quality of leadership by showing me something that I don't need to see so me and other colleagues should follow him by the good things that we see by him, not only sitting in a chair, we need to see skills and we need to see something that really improving us by communications, by paperwork, by hand work.					
				12	WJL	7/11/2013 1:33 PM
	Interviewer: So communication skills not only with each other but physicians, with patients, with the public					
	Interviewee: Exactly, public, hospitals, physicians, nurses because they don't know you are a nurse or you a physician, they don't know what your job, what is the knowledge that you had, and they don't know what is the difference between EMT basic, EMT intermediate, EMT paramedic, and specialist in Bachelor's degree, so I think misunderstanding the career that you are working in as a disaster. They should indicate and chose leadership to people that we are this people. We provide this thing, this thing, this thing because mainly the misunderstanding between the paramedics and the physicians especially patients lives so it is critical area, they should fix it.					

Internals\Interviews\Interview #04

Yes 0.0613 9

				1	WJL	7/11/2013 1:38 PM
	How to take the decision					

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				2	WJL	7/11/2013 1:38 PM
						How to be confident in the field.
				3	WJL	7/11/2013 1:42 PM
						has to make decisions
				4	WJL	7/11/2013 1:42 PM
						We should teach them how to be a leader in the field
				5	WJL	7/11/2013 1:43 PM
						how to make decisions
				6	WJL	7/16/2013 4:18 PM
						how to be good appearance to the people
				7	WJL	7/11/2013 1:43 PM
						how to communicate
				8	WJL	7/11/2013 1:43 PM
						He has to be a good paramedic at first
				9	WJL	7/11/2013 1:44 PM
						He has to focus about to be a good paramedic and doesn't think about the leadership at first then he has to work with other or make interviews with some leaders like supervisors in EMS administrations or the chief manager so and then he has to develop to work with he has to develop his knowledge, has to read about the leadership, lead about that and how to deal with papers, how to deal with employees he is the lead on, I think that is it.

Internals\Interviews\Interview #05

Yes 0.0616 3

				1	WJL	7/16/2013 4:19 PM
						Yeah you know sometimes because if you are establishing operation and administration at the same time it will be difficult to combine between them and what we are doing here we are trying to be fair with our employer that is what we are doing.
				2	WJL	7/16/2013 4:19 PM
						Flexibility I think it is good sometimes and bad sometimes, what I mean like sometimes when you are flexible with your employer or being leadership it is nice because all your employer will be confident will be like you, will be respect you, sometimes being flexible would make your employer don't respect you, sometimes they are going to be careless.
				3	WJL	7/11/2013 1:56 PM
						Interviewee: I want to see the qualified one in this position.
						Interviewer: And what makes someone qualified?
						Interviewee: Certificate, doing his best to get training, someone able to manage everything, I think not all about certificate sometimes. Experience as well.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
Internals\Interviews\Interview #06						
Yes		0.1269	20			
				1	WJL	7/16/2013 4:19 PM
	I have learned transparency.					
				2	WJL	7/11/2013 3:14 PM
	I have learned how to help people in a professional way.					
				3	WJL	7/16/2013 4:20 PM
	I have learned humility and we are still learning, we need more to learn to be good leadership.					
				4	WJL	7/16/2013 4:20 PM
	How to be patient.					
				5	WJL	7/11/2013 3:17 PM
	man has to have good things like honesty,					
				6	WJL	7/16/2013 4:20 PM
	man has to have good things like honesty					
				7	WJL	7/16/2013 4:21 PM
	transparency,					
				8	WJL	7/16/2013 4:21 PM
	humility,					
				9	WJL	7/11/2013 3:17 PM
	listening for his staff, listening from the weakest before the strongest,					
				10	WJL	7/11/2013 3:17 PM
	sit together gathering the teams and know their problems, solve it					
				11	WJL	7/11/2013 3:19 PM
	Honesty, if the leadership become honest man everybody will admire and like him, believe him, work with him, and help him if he need, answer his command, don't make him in trouble, if they like this is I think a good example for good leadership, the first quality I believe it is honesty,					
				12	WJL	7/11/2013 3:19 PM
	also good leadership has good skills for communication and important skills he has to be, he has to have good skills with communication with his staff and with the other facility					
				13	WJL	7/11/2013 3:20 PM
	Interviewer: And then communication and part of those communication skills is being able to communicate with as you said fire department, police department, government, hospitals					
	Interviewee: And first of all with his staff good communication with his staff and with other department					
				14	WJL	7/11/2013 3:21 PM
	Leadership good decision					

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				15	WJL	7/11/2013 3:22 PM
	solving problem					
				16	WJL	7/11/2013 3:22 PM
	good communication					
				17	WJL	7/16/2013 4:22 PM
	other department relation.					
				18	WJL	7/11/2013 3:22 PM
	communication					
				19	WJL	7/11/2013 3:22 PM
	Communication is very important. In our classes it was not too much communication skills we had and we faced, I faced here in our facility a lot of problems coming from communication. Bad communication or lack of communication that makes a lot of trouble.					
				20	WJL	7/11/2013 3:23 PM
	If you accept the order, teach them how to accept the order and think about the order not for the order like order, accept the order and what else yeah we have you know as a paramedic in the hospital there is a problem with communication with the nurses, usually paramedic and nurses have tough time right communication, we need to solve this problem, it is biggie, you have this experience? Between our paramedic and nurses in the ER usually we have a bad lack of communication, not bad, lack of communication. I personally want to solve this problem.					
	Internals\Interviews\Interview #07					
	Yes	0.0878	38			
				1	WJL	7/11/2013 7:48 PM
	Well I think first of all from Dr. Stewart how to be a good clinician and then take someone else and help them to be a good clinician, I mean like as he mentored us then we were mentoring other people behind us so that was one experience.					
				2	WJL	7/11/2013 7:51 PM
	trying to just be a leader to the people that you are with especially like I said as a teacher, oh man that is a tough one, I mean that it is something that was just I think personally in me like I said staying in the field, so I could like nobody could come in to the classroom and say you don't understand, you are not out there or I know lots of people teach from the book but the reality in the field is different so by staying in the field and in a sense being there on that same level with the people I was working with but yet still being a teacher was something that I you know I just did because that was what I felt like I needed to do, so no one ever said here is an official way to do that.					
				3	WJL	7/11/2013 8:18 PM
	I think in some ways some of the mentors that I had or the leaders that I followed were more interested also in me in a larger scope					
				4	WJL	7/11/2013 8:21 PM
	I mean so confidence, demonstrating confidence					
				5	WJL	7/16/2013 4:22 PM
	honesty because I know some people that weren't very honest about what they were writing on their trip sheets and what really happened and those situations it is hard to write down that you made a mistake					
				6	WJL	7/16/2013 4:22 PM
	honest					

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	compassion		7		WJL	7/16/2013 4:23 PM
	integrity		8		WJL	7/16/2013 4:24 PM
	honesty		9		WJL	7/16/2013 4:24 PM
	compassion, concern or like not empathy, I don't know what would you say not compassion empathy, like concern a genuine concern for the person you know like seeing them succeed and not being threatened by this person you know but helping them		10		WJL	7/16/2013 4:24 PM
	they are well educated in EMS, very well educated, both of them humbled themselves and actually took the EMT class so they could take the EMT national registry exam, these are two physicians that are board certified in Emergency Medicine in their countries		11		WJL	7/16/2013 4:25 PM
	their actions and their motivation that they are on the right track, they have the best intentions of the students		12		WJL	7/16/2013 11:59 AM
	they don't cut corners		13		WJL	7/16/2013 4:26 PM
	I see them at like CON ed classes, they are always there, they are not complaining about oh you know I had to work last night and they had me scheduled for training a day today, they show up, you see them at PHDLS, you see them ACLS, you see them at like conferences, even conferences that aren't related to EMS, expiratory infections thing, they are there trying to get some knowledge so these are line people they are not at the top of the chain you know I mean what we would consider to be leaders but they are all leaders within our organization in their own realm.		14		WJL	7/16/2013 4:26 PM
	I see them at like CON ed classes, they are always there, they are not complaining about oh you know I had to work last night and they had me scheduled for training a day today, they show up, you see them at PHDLS, you see them ACLS, you see them at like conferences, even conferences that aren't related to EMS, expiratory infections thing, they are there trying to get some knowledge so these are line people they are not at the top of the chain you know I mean what we would consider to be leaders but they are all leaders within our organization in their own realm.		15		WJL	7/16/2013 4:26 PM
	Right and are good providers, they are providing good care in the field.		16		WJL	7/11/2013 8:25 PM
	I would expect would be first of all that there is a real genuine concern for patient care. This has to be in front of every other decision that is made, financially, medically, I mean the whole system.		17		WJL	7/16/2013 4:26 PM
	I think I would want to see that person be willing to sacrifice their position for the right decision in support of the patient so if it means going against the grain and if it is what is right and what is for the patient then they need to have the confidence to stand up for what is right		18		WJL	7/16/2013 4:27 PM
	I think I would want to see that person be willing to sacrifice their position for the right decision in support of the patient so if it means going against the grain and if it is what is right and what is for the patient then they need to have the confidence to stand up for what is right		19		WJL	7/16/2013 4:27 PM
	I think I would want to see that person be willing to sacrifice their position for the right decision in support of the patient so if it means going against the grain and if it is what is right and what is for the patient then they need to have the confidence to stand up for what is right		20		WJL	7/16/2013 4:27 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				21	WJL	7/16/2013 4:31 PM
						I think that a leader has to be touchable, reachable, a reachable person.
				22	WJL	7/16/2013 4:28 PM
						so I think reachable in that sense of like we don't have to go to dinner together but at least hear me out if I have gone through all the steps and the chain of command and even just in general being willing to ok show up at a station one day and say hey what is going on guys, you know I mean get out of the office and touch people again in the field, so from that perspective.
				23	WJL	7/16/2013 4:29 PM
						Obviously doing the right thing for patient care.
				24	WJL	7/16/2013 4:28 PM
						Obviously doing the right thing for patient care.
				25	WJL	7/11/2013 8:31 PM
						I think they should be involved in teaching and mentoring.
				26	WJL	7/11/2013 8:31 PM
						I mean I think that is an important thing because the goal is to create somebody who is better than you because you already know all the mistakes that I have made but hopefully I can help someone else not make those mistakes.
				27	WJL	7/16/2013 4:29 PM
						guess compassionate, care I mean these are the things that you know leaders have to be strong and they have to make decisions that are hard, you know when I had to fire people I had to do things you know and it broke my heart in some senses you know what I mean I didn't want to have to do it to these guys but at the same time I have got a responsibility to the patient, to the system to other people,
				28	WJL	7/11/2013 8:33 PM
						you know what I mean to make the decisions that are the hard decisions and that is why you are the leader.
				29	WJL	7/11/2013 8:34 PM
						Not reproducing your mistakes, we were talking about, or being aware of your weaknesses.
				30	WJL	7/16/2013 4:32 PM
						Again I think the skills part of leadership can be given to somebody, this is how you negotiate with somebody, this is how you handle somebody and those kinds of things.
				31	WJL	7/16/2013 4:33 PM
						Skills you can learn but the other part, skills is not all what leaders are about, leaders are about person and skills so if we are focusing on I think dealing with some of the things that affect providers we might come up with some better leaders, you know there is pressures that are on people, you know post-traumatic stress and how we are dealing with patients or thinking a lot more about how we are doing EMS, like in itself cause more leaders to come or you know to evolve from the system and that means being willing to take a risk I mean in certain things, not on the patient care side but you know by systems and management and all of those things
				32	WJL	7/11/2013 8:45 PM
						yeah and I think one thing I could say would be communications because if we can I think leaders are communicators for sure.
				33	WJL	7/11/2013 8:45 PM
						I think things about communication skills
				34	WJL	7/16/2013 4:34 PM
						how to negotiate in the situation, how do two people come out winners when they both want to be right, you know those kinds of things are the tools that can be given but whoever we perceive are the leaders in our organizations should be looking for those qualities in other people and then we should be investing in those people and helping them to develop their talents and see how they go from there.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				35	WJL	7/11/2013 8:46 PM
				communication skills so whether it is administration or operations both of them need communication skills.		
				36	WJL	7/16/2013 4:34 PM
				research		
				37	WJL	7/16/2013 4:34 PM
				how to interpret research would be a good tool		
				38	WJL	7/16/2013 4:35 PM
				the research skills		

Internals\Interviews\Interview #08

Yes	0.0507	4			
			1	WJL	7/12/2013 9:15 AM
			I learned good information about leadership for example it is not good to be a leadership when you have skill that is lower than or someone else or many people can do it better than you because you are the leader you supposed to be not the best so supposed to be good about some of the skill because if someone makes something wrong you could correct him, you could tell me what the right, what the wrong, if you are not in this level of skill then you don't deserve to be leadership and about your as well about your mind thinking.		
			2	WJL	7/12/2013 9:16 AM
			If you can't like manage some situation and for sure it is ok to share other about some idea or what you are the maker decision in that.		
			3	WJL	7/16/2013 4:35 PM
			If you have someone with good education or high level education they will develop the work to the best but if we still have some people they have the same old way that the EMS was worked 20 or 30 years ago then it will not develop any more, it can't stay in the same way, the same skills, same education, same everything that will not going to work, will not develop the EMS anyway.		
			4	WJL	7/16/2013 4:35 PM
			If you have someone with good education or high level education they will develop the work to the best but if we still have some people they have the same old way that the EMS was worked 20 or 30 years ago then it will not develop any more, it can't stay in the same way, the same skills, same education, same everything that will not going to work, will not develop the EMS anyway.		

Internals\Interviews\Interview #09

Yes	0.0624	22			
			1	WJL	7/12/2013 10:21 AM
			I will tell you there is different phases or different ways of presenting information, whether it be to the patients, to the relatives of patients, or your colleagues, you have to learn or have learned different instances require different tactics, basically contingency theory, you don't use the same tactics for every situation.		
			2	WJL	7/16/2013 4:36 PM
			have learned to collaborate with others		
			3	WJL	7/16/2013 4:36 PM
			I learned to be authoritative because there was no wiggle room so I had to get done at that moment,		

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				4	WJL	7/16/2013 4:37 PM
						I learned to compromise which is different of course from collaboration
				5	WJL	7/16/2013 4:38 PM
						disseminating information
				6	WJL	7/16/2013 4:38 PM
						teamwork
				7	WJL	7/16/2013 4:38 PM
						conflict,
				8	WJL	7/16/2013 4:39 PM
						teambuilding
				9	WJL	7/16/2013 4:39 PM
						not to build tunnel vision
				10	WJL	7/16/2013 4:39 PM
						Tunnel vision is when you only see what is in front of you, you don't see everything else that is behind those blinds on either side and you can't fully get a global view if you are only looking directly ahead, you know there are things to the right of you, there is aspects to the left of you, and even behind you. You have to do a 360, you can't do even a 180, a 360 turn, evaluate everything for what it is worth, because sometimes the information that we miss, is the integral part to what is needed for the salvation of a particular situation or case.
				11	WJL	7/12/2013 10:31 AM
						Well not always depending on the case. I always ask for documentation. I have documentation written, I have verbal documentation interviews I conduct, I have recordings that I do whether the situation has his own phone, but I can go back and listen to and I bring all of that information and say oh this is the problem and the majority of the time I would say, 90% of the time I get to the source of the problem, maybe 10% where I still can't get it and what I do at that point then I bring all parties together and say hey what is going on, I got this from you, I got this from you, and then when all parties are together you hear additional information or you get additional information that you didn't get previously and then you go oh I got it now, I see. So most of the time many of the conflicts that I have had to deal with have been a misunderstanding, miscommunication, one way or the other, whether it be a language barrier, took something the wrong way, or the individual used a certain tone, inflection, we are all guilty of that at some level, we get up in the mornings, you need a few minutes, go to the restroom, wash up, some people need their coffee. you know things happen naturally at no ones fault
				12	WJL	7/12/2013 10:31 AM
						you know but learn from the past experience, you have seen this before, although there might be several, several differences, you can still utilize your knowledge and experience from other situations, similar situations because that would allow you to draw better conclusions faster.
				13	WJL	7/16/2013 4:41 PM
						I think the more you empower your subordinates, the more you hand pick them, for instance I have projects that are going on right now simultaneously that I am responsible for overseeing, and I have been overseeing this because I have been entrusted with them
				14	WJL	7/16/2013 4:41 PM
						I think the more you empower your subordinates, the more you hand pick them, for instance I have projects that are going on right now simultaneously that I am responsible for overseeing, and I have been overseeing this because I have been entrusted with them
				15	WJL	7/16/2013 4:41 PM
						He makes sure that he delegates authority, empowers his people, and doesn't see himself as the center of attention but the organization or the team as the center and I think that you know especially I hate to say in this part of the world we still haven't come to yet. In the states you see that a lot more, but here I think they still have a little way to go.
				16	WJL	7/16/2013 4:42 PM
						Change agents

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				17	WJL	7/16/2013 4:41 PM
						Yeah I expect compassion
				18	WJL	7/16/2013 4:42 PM
						honesty
				19	WJL	7/16/2013 4:42 PM
						honor
				20	WJL	7/16/2013 4:43 PM
						experiential knowledge
				21	WJL	7/12/2013 10:45 AM
						We need to be able to admit to where we have more expertise at and where we don't have expertise at and be able to develop ourselves to get to that point where we feel comfortable enough to admit to everyone else and to ourselves that this is our profession, this is what we have chosen but there is another side that we depend on as well.
				22	WJL	7/12/2013 10:45 AM
						think until we realize that until we are able to listen to ourselves
Internals\Interviews\Interview #10						
	Yes	0.0863	38			
				1	WJL	7/12/2013 10:59 AM
						Definitely I was learned to lead by example.
				2	WJL	7/16/2013 4:44 PM
						There's stuff you can always learn and develop.
				3	WJL	7/12/2013 10:59 AM
						Leading by example is the key.
				4	WJL	7/16/2013 4:46 PM
						Having integrity to me is key.
				5	WJL	7/16/2013 4:46 PM
						You might have to ... not only be a leadership to your crew, not only do you have to be a leadership to other crews that show up, the firefighters and other services.
				6	WJL	7/12/2013 11:01 AM
						Problem solving skills
				7	WJL	7/12/2013 11:03 AM
						To be a leader you have to make tough decisions

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			8		WJL	7/12/2013 11:07 AM
						leadership is being able to make decisions in chaotic situations and to stay calm.
			9		WJL	7/16/2013 4:47 PM
						Another good example of good and bad leadership would be integrity, doing what's right even when no ones looking.
			10		WJL	7/16/2013 4:47 PM
						I'd say integrities another key one
			11		WJL	7/12/2013 11:08 AM
						leading by example
			12		WJL	7/16/2013 4:47 PM
						No one respects what you say if you're not empowered. That's the problem with the service out here is they don't empower the team leaders who they make everybody to make the right decisions and make people listen to them and do the right thing. Now the team leaders basically just sit there and say whatever operations manager tells them and no one listens to them.
			13		WJL	7/16/2013 4:48 PM
						That's another thing for leaders, it's good to encourage people. Not only come to people when they're doing a bad job, but come to say hey you guys are doing a great job.
			14		WJL	7/16/2013 4:48 PM
						integrity
			15		WJL	7/12/2013 11:10 AM
						problem solving skills
			16		WJL	7/16/2013 4:49 PM
						controlling things, and that means controlling other crew members, patients, patients family, and bystanders on the scene.
			17		WJL	7/16/2013 4:48 PM
						Always knowing that you can learn more and always striving to be better. Not settling for mediocrity. Not just wanting to do the same every day and not learn new things. Thinking the know it all attitude, I mean you're a medic you know, it doesn't work in EMS.
			18		WJL	7/16/2013 4:48 PM
						What's right when nobody is looking.
			19		WJL	7/12/2013 11:11 AM
						practicing what you preach
			20		WJL	7/12/2013 11:11 AM
						using your problem solving skills.
			21		WJL	7/16/2013 4:50 PM
						A big thing with EMS, too, is being able to speak up. Sometimes people are afraid to speak up and say something they see.
			22		WJL	7/16/2013 4:50 PM
						A big thing with EMS, too, is being able to speak up. Sometimes people are afraid to speak up and say something they see.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			23		WJL	7/16/2013 4:50 PM
		The leader needs to be able to accept what these people are speaking. I've worked with people before that I've spoke up and said something and they ostracize me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.				
			24		WJL	7/16/2013 4:50 PM
		The leader needs to be able to accept what these people are speaking. I've worked with people before that I've spoke up and said something and they ostracize me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.				
			25		WJL	7/16/2013 4:50 PM
		The leader needs to be able to accept what these people are speaking. I've worked with people before that I've spoke up and said something and they ostracize me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.				
			26		WJL	7/16/2013 4:50 PM
		The leader needs to be able to accept what these people are speaking. I've worked with people before that I've spoke up and said something and they ostracize me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.				
			27		WJL	7/16/2013 4:50 PM
		The leader needs to be able to accept what these people are speaking. I've worked with people before that I've spoke up and said something and they ostracize me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.				
			28		WJL	7/16/2013 4:59 PM
		The leader needs to be able to accept what these people are speaking. I've worked with people before that I've spoke up and said something and they ostracize me, treated me like I was an idiot in front of all these people. That made me never want to say anything again.				
			29		WJL	7/16/2013 4:51 PM
		Interviewer: Tunnel vision. What would you define tunnel vision as? Interviewee: When you get so focused on something, focused in, like I see you, I see you on the ground. I run over to you. I think you're having a heart attack. I'm just looking over at you. Maybe there's someone there that knows what happened. Maybe over here there's a car flipped over and you were ejected out. Maybe there's a fire roaring up the side and I'm so zoned in and focus on you and only you and your problems that I don't see what's going on around us. They say tell a lot with tunnel vision, especially when you're new or when you're driving an ambulance they say don't get mesmerized by the lights and sirens. That was something that is said a lot, don't get tunnel vision because especially when you're new you can get so tunnel visioned that you're just looking straight ahead and you're not looking at these intersections and different cars coming and all that. Same type thing				
			30		WJL	7/12/2013 11:15 AM
		integrity				
			31		WJL	7/16/2013 4:51 PM
		Integrity				
			32		WJL	7/16/2013 4:51 PM
		patient advocate				
			33		WJL	7/12/2013 11:15 AM
		problem solving skills				
			34		WJL	7/16/2013 4:52 PM
		not being afraid to speak up if you say something because whether you've been on the job one day or 500 years, you might see something that no one wants to see. Especially when it relates to crew safety or patient safety.				
			35		WJL	7/16/2013 4:52 PM
		not being afraid to speak up if you say something because whether you've been on the job one day or 500 years, you might see something that no one wants to see. Especially when it relates to crew safety or patient safety.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				36	WJL	7/12/2013 11:17 AM
						Problem solving skills are critical
				37	WJL	7/16/2013 4:52 PM
						I think that's why I'm so hardcore about integrity and all this stuff because those are core military values
				38	WJL	7/16/2013 4:52 PM
						Integrity first, yeah.
Internals\Interviews\Interview #11						
	Yes	0.0617	22			
				1	WJL	7/13/2013 4:55 PM
						I would say, Mentorship,
				2	WJL	7/16/2013 4:52 PM
						As a provider, relations to leadership skills on the job, you have to learn to take control of a situation and that's a particular form of leadership I believe.
				3	WJL	7/16/2013 4:53 PM
						As a provider, relations to leadership skills on the job, you have to learn to take control of a situation and that's a particular form of leadership I believe.
				4	WJL	7/16/2013 4:52 PM
						As a provider, relations to leadership skills on the job, you have to learn to take control of a situation and that's a particular form of leadership I believe.
				5	WJL	7/13/2013 4:56 PM
						Mentor, if your with a less experienced person, like today for example, I have a new employee and so I'm trying to mentor him; Show him the right way to do things, not the wrong way, because it's a lot easier to start a new habit than to change an old one.
				6	WJL	7/16/2013 4:53 PM
						I think flexibility
				7	WJL	7/16/2013 4:54 PM
						Feedbacks important too. A good leader should always welcome feedback.
				8	WJL	7/16/2013 4:54 PM
						You need to be able to welcome feedback and change your leadership style that's appropriate for the person that you're trying to lead.
				9	WJL	7/16/2013 4:54 PM
						And act upon the feedback, don't just absorb it and do nothing about it. You need to be able to actually take that feedback and do something with it, not just ignore it.
				10	WJL	7/16/2013 11:47 AM
						flexible and understand the problems that your employees have or facing and act upon them.
				11	WJL	7/16/2013 4:54 PM
						flexible and understand the problems that your employees have or facing and act upon them.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				12	WJL	7/16/2013 4:55 PM
						attempt to correct it or some sort of resolution or compromise and yeah, I think that shows at that time that they're effectively leading and at other times when those criteria not met, they're not effectively leading.
				13	WJL	7/16/2013 4:54 PM
						attempt to correct it or some sort of resolution or compromise and yeah, I think that shows at that time that they're effectively leading and at other times when those criteria not met, they're not effectively leading.
				14	WJL	7/16/2013 4:55 PM
						flexibility
				15	WJL	7/16/2013 5:01 PM
						the willingness to listen to someone's problem and the knowledge on how to correct it.
				16	WJL	7/16/2013 4:55 PM
						the willingness to listen to someone's problem and the knowledge on how to correct it.
				17	WJL	7/13/2013 5:05 PM
						When a good leader, when they don't know what to do they'll say "I don't know, but I am going to find someone that can help you." or "I will get it figured it out, but this above my scope, we need to go to the appropriate party." That's a big difference between a good leader and a bad leader is when to know their limitations.
				18	WJL	7/13/2013 5:18 PM
						It's a fluid process, what works today may not work tomorrow. At least you can start out with pamphlets, you can start out with a national course, but that needs to be ongoing leadership like, "How have you grown and where are your weaknesses?" Per person at least with the managers, you know I have to do it with everyone, but at least start somewhere. For example with your initial line managers and so that they have the tools so where they'll actually know "OK, well if this doesn't work, it's OK to do this." Especially specific to here, you got different cultures.
				19	WJL	7/13/2013 5:39 PM
						Lead by example." That's a good one.
				20	WJL	7/16/2013 4:58 PM
						n't micro-manage either, to the point to where you have to stay right in behind people and make them do, because then that's a problem. Number one- you don't have to be micro-managing you need to give people the autonomy to complete the task. I strongly believe there is a difference between moving in a straight line, sometimes you have to curve around the object to get to the same goal.
				21	WJL	7/13/2013 5:40 PM
						They are going to say 'Oh well, I don't have ... my manager doesn't trust me to do the right thing or they do it this way.
				22	WJL	7/13/2013 5:41 PM
						lead by example
Internals\\Interviews\\Interview #12						
						Yes
			0.0317	11		
				1	WJL	7/16/2013 5:00 PM
						Sometimes you have to adjust your ... how do you call that? your limit, your temper.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			2		WJL	7/13/2013 5:59 PM
						Like the communication between you and your partner. That's what I've learned.
			3		WJL	7/13/2013 6:01 PM
						OK. In the field of EMS, the good example of a leadership is he knows what he's doing. That's the first step.
			4		WJL	7/13/2013 6:01 PM
						Second one, he know how to communicate with the people, with his branches, EMT or paramedics, if he's in command and everything.
			5		WJL	7/16/2013 5:00 PM
						patience to do his job
			6		WJL	7/16/2013 5:00 PM
						they should be fair on everything
			7		WJL	7/16/2013 5:01 PM
						Be fair.
			8		WJL	7/16/2013 5:00 PM
						The next one is they should know how to listen.
			9		WJL	7/16/2013 5:01 PM
						they should know how to listen
			10		WJL	7/16/2013 5:02 PM
						They should not bring themselves above other people, other EMS provider.
			11		WJL	7/16/2013 5:02 PM
						They should know how to respect other EMS instead of trying to compete with them.

Internals\\Interviews\\Interview #13

Yes 0.0559 4

			1		WJL	7/16/2013 5:02 PM
						When you approach the patient, you introduce yourself first. After introducing yourself, and address the patient's need. You have to do the right thing in any basis, not just do the way you think, what you feel, that this is the right thing you gotta do, what you've learned.
			2		WJL	7/13/2013 6:39 PM
						I would say that a good example for EMS is that they talk about what the problem is during work, unlike the ... sometimes the other co-staff members, they backstab each other when they're not there to stop the one who gets talked about. That's one of those bad things that I recognize throughout the year as serving as an EMS practitioner.
			3		WJL	7/16/2013 5:03 PM
						you have to be flexible with their co-workers.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			4		WJL	7/13/2013 6:42 PM
They can set good examples,						
<hr/>						
Internals\Interviews\Interview #14						
Yes		0.0351	28			
			1		WJL	7/14/2013 4:21 PM
"Other people, they get a line, meds, transport, have a nice day! But you, you did oxygen, you talked them down so they're actually calm, you explained everything that was going on, you started the line, you gave him some meds, and then while you're talking to them, you get their legs that are doing the Y back into position because it was kind of hard to fit him in the truck with his legs just sticking out sideways						
			2		WJL	7/16/2013 5:04 PM
calm						
			3		WJL	7/16/2013 5:04 PM
The proactive ones, they see the potential for the situation						
			4		WJL	7/14/2013 4:23 PM
got hired was to bring all this experience with us to help foster the department to be leaders and trainers for the people that were here but they don't have any experience behind it.						
			5		WJL	7/14/2013 4:24 PM
We had no idea what are we getting into except that they needed people to be leaders on the trucks to show the locals how to be professional. How to present yourself that you know what the hell you're doing, that when you say this is the answer the person that you're talking to knows that yes this is the answer.						
			6		WJL	7/16/2013 5:04 PM
One of my very good friends is my assistant manager for the service and we have had knock down drag out fights at work but because of our professionalism and where we've been and we know how to act and work, we know how to work and act outside of work, still comes over for beer, watches a race, have a great time but when it's at work, it's work. It's not personal and we both know it, and it is very hard for some people to take this job not personally because you're in a closed environment. You feel very responsible for the patients that you take care of because you are responsible and you take that responsibility sometimes too personally when something goes wrong.						
			7		WJL	7/16/2013 5:05 PM
You can't take everything personal.						
			8		WJL	7/16/2013 5:05 PM
being diplomatic						
			9		WJL	7/14/2013 4:38 PM
A level of crisis management						
			10		WJL	7/16/2013 5:05 PM
The only reason I know how to guide them is because I've been in their position.						
			11		WJL	7/16/2013 5:06 PM
have a level of confidentiality.						

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				12	WJL	7/16/2013 5:06 PM
		The other leadership skill I think I've developed over the years is the sense of when something is wrong. People go through their day and they think that they are masking very, very well but there are little things that when you work with people everyday for 24 hours there are always little things and they think that they're just acting the way that they always have but when you pin them down on it they actually explode. They're thankful that I kind of push and prod and it doesn't matter what it is. If it has anything to do with the job or anything to do with personal life.				
				13	WJL	7/16/2013 5:07 PM
		conflict				
				14	WJL	7/14/2013 5:13 PM
		crisis intervention, mitigation, fixed				
				15	WJL	7/14/2013 5:14 PM
		having to work the problem you learn what you can and what you shouldn't do				
				16	WJL	7/14/2013 5:18 PM
		That's why management skills and management style it lacks a little bit. That's one of the things that I've learned from coming from the states that if a manager gets to that point of having to make a commitment of if you do not do this, this is what's going to happen, if you go into a hospital with an active chest pain patient and you do not have two IV established then you need to A, explain it, or B you are going to get reprimanded because it's poor patient care and it puts the patient in jeopardy, period.				
				17	WJL	7/16/2013 11:52 AM
		He has an open line, he'll keep communications open.				
				18	WJL	7/16/2013 5:07 PM
		his approachability				
				19	WJL	7/16/2013 5:07 PM
		willingness to treat everybody the same				
				20	WJL	7/14/2013 5:37 PM
		If you come up with a problem I would expect management to follow through.				
				21	WJL	7/16/2013 5:07 PM
		The willingness to listen and accept different ideas just because it's not your idea doesn't mean it's a bad idea.				
				22	WJL	7/16/2013 5:07 PM
		The willingness to listen and accept different ideas just because it's not your idea doesn't mean it's a bad idea.				
				23	WJL	7/16/2013 5:07 PM
		Treating everybody the same is huge for me				
				24	WJL	7/14/2013 5:38 PM
		They recognize when they're over their head, their willingness to ask for help.				
				25	WJL	7/14/2013 5:38 PM
		Every manager when they get a job, they should come up with an idea or have some sort of clue of okay, in two years where would I like the service to be. What accomplishments do I want this service to have and then do stuff to get that accomplished.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				26	WJL	7/14/2013 5:41 PM
						personality conflicts.
				27	WJL	7/14/2013 5:43 PM
						trust
				28	WJL	7/14/2013 5:46 PM
						It's kind of hard to be taught to be a leader unless you have one very important thing and that is very good guidance. In order for you to be a very good leader you have to be guided by a good leader that can show you or can teach you how to be a decent leader.
Internals\Interviews\Interview #15						
		0.0892	101			
				1	WJL	7/16/2013 5:08 PM
						always listened to her class.
				2	WJL	7/16/2013 5:08 PM
						level of compassion in what you're doing
				3	WJL	7/14/2013 5:59 PM
						It's kind of on-the-job training is what it is because you don't really ever know how you're going to handle that situation until you're faced with it and then at that point, it's up to you as a person to re-evaluate.
				4	WJL	7/14/2013 6:00 PM
						Okay, this is how I handle this situation today, what could I have done differently? What could I have said that would have comforted more? Or what could I have said to have had a better handle on the situation, or to take more control because things were out of control? You're always re-evaluating yourself. So as far as leadership skills go, that's another key piece. You have to have the ability to continuously re-evaluate your own being, what you're doing, how you're seeing things, how you're looking at things, and re-check your own thoughts and your own dynamics on the situation.
				5	WJL	7/16/2013 5:09 PM
						So people have to have the ability to come in and recognize their role and their place. Again, when it comes to leadership skills you do have to be able to recognize what is my role? What is my place? This isn't a contest for leader and powership. This is a we have to work together to the benefit of the situation.
				6	WJL	7/14/2013 6:02 PM
						So people have to have the ability to come in and recognize their role and their place. Again, when it comes to leadership skills you do have to be able to recognize what is my role? What is my place? This isn't a contest for leader and powership. This is a we have to work together to the benefit of the situation.
				7	WJL	7/16/2013 5:09 PM
						follow through
				8	WJL	7/16/2013 5:10 PM
						follow through
				9	WJL	7/14/2013 6:19 PM
						Not just experience, but asking questions to the primarily experienced. If you have a situation or you see a situation, even if you're not involved in it, just what you watch and you see take place, you kind of remember so if you ever find yourself in a position similar to the one that you've witnessed, you're going to retain a little bit of what you saw, and think, okay, well so and so did this, so I'll do the same thing because that worked in the situation.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				10	WJL	7/16/2013 5:10 PM
						I've learned how to take charge of a group of people.
				11	WJL	7/16/2013 5:10 PM
						I've learned how to take charge of a group of people.
				12	WJL	7/16/2013 5:10 PM
						ability to be able to control and environment, meet the needs,
				13	WJL	7/16/2013 5:11 PM
						quality of the job is what it should be versus just getting the job done. There's a difference between yes I got it done and yes I got it done the right way [laughing], or yes I got it done, and yes I got it done in a timely manner. Those things make a difference, so I've learned how to direct people hopefully without pissing too many people off.
				14	WJL	7/14/2013 6:29 PM
						So as a leader, I've learned to look at the situation as a whole and make decisions based on what I'm seeing and what I'm hearing; like I said controlling my own frustrations because if you're going to lead a group of people, you can't become frazzled in a critical situation.
				15	WJL	7/16/2013 5:12 PM
						So as a leader, I've learned to look at the situation as a whole and make decisions based on what I'm seeing and what I'm hearing; like I said controlling my own frustrations because if you're going to lead a group of people, you can't become frazzled in a critical situation.
				16	WJL	7/16/2013 5:12 PM
						You have to learn self-control in a lot of aspects as well.
				17	WJL	7/16/2013 5:12 PM
						self-control
				18	WJL	7/16/2013 5:13 PM
						I like to get the opinions of other people.
				19	WJL	7/16/2013 5:13 PM
						I like to get the opinions of other people.
				20	WJL	7/16/2013 5:13 PM
						I like to get the opinions of other people.
				21	WJL	7/16/2013 5:13 PM
						Control yourself first.
				22	WJL	7/14/2013 7:13 PM
						Yes and paying attention, and recognizing what works and what doesn't.
				23	WJL	7/16/2013 5:13 PM
						remain calm in a crisis situation
				24	WJL	7/16/2013 5:13 PM
						So, somebody with good leadership skills has got to be able to take charge of multiple facets.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				25	WJL	7/16/2013 5:14 PM
						leadership skills has got the ability to be able to look at the scene and in a matter of minutes say okay, I need this here, this here, and this here.
				26	WJL	7/16/2013 5:14 PM
						As a leader, they have to be able to recognize, pay attention, the health and well-being of their crew, mentally and physically; the safety of the scene and onlookers, and other cars coming and going from the scene, the patient themselves. I think that a good leader also has the ability to critique a situation.
				27	WJL	7/16/2013 5:15 PM
						the way that you maintain a level of timeliness
				28	WJL	7/16/2013 5:15 PM
						quality
				29	WJL	7/16/2013 5:15 PM
						Or the ones that get tunnel visioned
				30	WJL	7/16/2013 5:15 PM
						But the ones that get the tunnel vision that would be a bad leader.
				31	WJL	7/16/2013 5:15 PM
						So people need to be able to talk to people.
				32	WJL	7/14/2013 7:17 PM
						They need to have good communication skills. A leader would have good communication skills.
				33	WJL	7/16/2013 5:16 PM
						To be a leader you would need to be able to have this person that, maybe be a little closer to you than another employee, but still be able to sit down and handle the situation that needed to be handled, in a professional manner, without the emotional feelings involved in it.
				34	WJL	7/16/2013 5:16 PM
						Yes, but also have the ability to separate personal from professional.
				35	WJL	7/16/2013 6:04 PM
						I need to remain neutral in that situation
				36	WJL	7/16/2013 6:04 PM
						I still need to remain neutral and hear both sides equally and be able to rule a judgment fairly.
				37	WJL	7/16/2013 6:04 PM
						Be able to remain neutral.
				38	WJL	7/16/2013 6:04 PM
						Yes. Remain neutral when making a decision.
				39	WJL	7/16/2013 6:04 PM
						I'm not 100% sure that neutral is the right word. What I'm looking for, is if I was going to have to define the term neutral for this particular conversation, I guess I would say, that it would be the ability to base a decision on fact and not emotion.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				40	WJL	7/16/2013 6:04 PM
						Yes. You can't ever say I have a hard time saying, no emotion. I think that emotion plays a role in everything in our lives, absolutely everything. The simple fact that if somebody I was very close to did something really stupid that was against protocol, I would need to remain neutral, as I call it.
				41	WJL	7/16/2013 6:05 PM
						Yes. You can't ever say I have a hard time saying, no emotion. I think that emotion plays a role in everything in our lives, absolutely everything. The simple fact that if somebody I was very close to did something really stupid that was against protocol, I would need to remain neutral, as I call it.
				42	WJL	7/16/2013 6:05 PM
						He's fine with it, because you have to have the ability to separate personal from professional
				43	WJL	7/16/2013 6:05 PM
						I think that that's very important for somebody who is going to take on a leadership role. I think it's important for anybody, truthfully. In our situation, I think that would be an important key factor, regardless if they were in a leadership role. Especially, if you're going to be in a leadership role. You cannot play favorites. You can't let emotions weight into it. You have to let your professional stay separate from your personal.
				44	WJL	7/16/2013 6:05 PM
						I think that that's very important for somebody who is going to take on a leadership role. I think it's important for anybody, truthfully. In our situation, I think that would be an important key factor, regardless if they were in a leadership role. Especially, if you're going to be in a leadership role. You cannot play favorites. You can't let emotions weight into it. You have to let your professional stay separate from your personal.
				45	WJL	7/14/2013 7:28 PM
						I guess, you just have to recognize. I guess, the first step would be, people would have to be willing to take responsibility for their actions.
				46	WJL	7/14/2013 7:28 PM
						It first, I think, has to start with people have to take responsibility for their actions.
				47	WJL	7/14/2013 7:28 PM
						if people were going to strive for that ability to do that, they would have to have the mindset that they weren't going to take things personally. Which is sometimes hard to do, I think, for people.
				48	WJL	7/14/2013 7:28 PM
						I think it's very difficult for people sometimes to do that, to not take things personally. I've taken things personal before.
				49	WJL	7/14/2013 7:31 PM
						Like, when we have our new medics come on board, our new medics are generally paired up with seasoned people.
				50	WJL	7/16/2013 6:06 PM
						If you were going to strive for that, I would say, listen with an open mind.
				51	WJL	7/16/2013 6:07 PM
						Keep your personal and your professional separate.
				52	WJL	7/16/2013 6:07 PM
						Bad examples of leadership would be the people who say, "Do as I say, don't do as I do." They do things the way that they feel like they want to do. When it comes down to it, they'll tell you you've got to follow the books, but they'll go around and do it a different way if they want to. If you want to set a good example, then you need to set the example that you want followed.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				53	WJL	7/16/2013 6:07 PM
						Bad examples of leadership would be the people who say, "Do as I say, don't do as I do." They do things the way that they feel like they want to do. When it comes down to it, they'll tell you you've got to follow the books, but they'll go around and do it a different way if they want to. If you want to set a good example, then you need to set the example that you want followed.
				54	WJL	7/14/2013 7:33 PM
						You need to set the example that you want followed.
				55	WJL	7/16/2013 6:07 PM
						I think that if there are rules applied in a situation, then you need to stand by those.
				56	WJL	7/16/2013 6:07 PM
						I think that if there are rules applied in a situation, then you need to stand by those.
				57	WJL	7/16/2013 6:07 PM
						I think that if there are rules applied in a situation, then you need to stand by those.
				58	WJL	7/16/2013 6:08 PM
						If you're going to set a policy, you have to live by it. In a leadership position, if you're going to put a policy in place, you need to be able to back it up.
				59	WJL	7/16/2013 6:08 PM
						If you're going to set a policy, you have to live by it. In a leadership position, if you're going to put a policy in place, you need to be able to back it up.
				60	WJL	7/16/2013 6:08 PM
						You don't want to move people up the ladder. A bad example of a leader would be somebody that would put somebody in a higher position or give them more authority than what they actually qualify for, just because their friends, or just because ... take advantage of their waste, as they call it here.
				61	WJL	7/16/2013 6:08 PM
						You don't want to move people up the ladder. A bad example of a leader would be somebody that would put somebody in a higher position or give them more authority than what they actually qualify for, just because their friends, or just because ... take advantage of their waste, as they call it here.
				62	WJL	7/16/2013 6:08 PM
						He was able to separate the personal from the job.
				63	WJL	7/16/2013 6:09 PM
						empowered to follow things through.
				64	WJL	7/16/2013 6:09 PM
						empowering
				65	WJL	7/14/2013 9:53 PM
						professionalism.
				66	WJL	7/14/2013 9:53 PM
						professionalism is a good strong leadership quality.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				67	WJL	7/14/2013 9:53 PM
						professional,
				68	WJL	7/16/2013 6:09 PM
						just about everything that you do. In the way that you present yourself and your appearance everyday, that you're showered and clean, in the way that you speak to people, in the way that you handle your patients, in the way that you handle the phone when you answer the phone. I think that being professional is absolutely one of the top important key factors to somebody that's going to be in leadership position.
				69	WJL	7/14/2013 9:53 PM
						just about everything that you do. In the way that you present yourself and your appearance everyday, that you're showered and clean, in the way that you speak to people, in the way that you handle your patients, in the way that you handle the phone when you answer the phone. I think that being professional is absolutely one of the top important key factors to somebody that's going to be in leadership position.
				70	WJL	7/16/2013 6:09 PM
						Fairness,
				71	WJL	7/16/2013 6:09 PM
						your ability to remain calm
				72	WJL	7/16/2013 6:14 PM
						your ability to pay attention,
				73	WJL	7/16/2013 6:14 PM
						to listen
				74	WJL	7/16/2013 6:14 PM
						to separate professional from personal.
				75	WJL	7/14/2013 9:54 PM
						Be professional
				76	WJL	7/14/2013 9:55 PM
						professionalism
				77	WJL	7/14/2013 9:55 PM
						professionalism
				78	WJL	7/14/2013 9:56 PM
						Professionalism
				79	WJL	7/16/2013 6:15 PM
						You need to have confidence in yourself. If you don't have any confidence in yourself, people are not going to have confidence in you either. I think having confidence in yourself is also very important in being a leader.
				80	WJL	7/16/2013 6:18 PM
						fair
				81	WJL	7/14/2013 10:02 PM
						professional

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				82	WJL	7/16/2013 6:20 PM
		listen				
				83	WJL	7/16/2013 6:20 PM
		ability to and the patience				
				84	WJL	7/16/2013 6:20 PM
		I think that team building skills is a great thing to teach in EMS. EMS is a team effort. You work in pairs or more. I think that team building is especially important in EMS.				
				85	WJL	7/16/2013 6:20 PM
		Team building, on the other hand, I think is very important.				
				86	WJL	7/14/2013 10:14 PM
		How to communicate with people. There's just so many different things that you can learn when it comes to team building. Yes, I think it's something that they should have complete piece on in all EMS classes. On how to work together with people that you don't know. How to communicate. How to work through issues. Not everybody gets along together. Sometimes you have to recognize how to work through issues with people. That it's okay to approach somebody and say, "Look, this is how I am. This is what I like to do. How do you do things? Let's get it off from the beginning."				
				87	WJL	7/14/2013 10:14 PM
		Teach people to communicate immediately. When you and I meet for the first time we're going to get thrown on a truck together. Neither one of us has ever met anybody until today. Yet, we're going to go work on a truck together and take care of patients. I'm going to jump on the truck and I'm going to be like, "Bill, what do you need to know from me? These are my skills. These are my strong points. This is what I feel like I'm strong in. This is the areas that I feel like I'm weak in." If it comes to reading some of these higher cardiac rhythms, I'm not very good at that. I question myself. I always second-guess myself. If we have a cardiac patient, that's going to be my weaker area. I'll let you know, off the bat, that cardiac is my eager area. Let me tell you, I can do this and I'm really good at this. I'll get my skills done.				
				88	WJL	7/14/2013 10:15 PM
		I think it's just communication in general.				
				89	WJL	7/16/2013 6:21 PM
		Teaching people confidence goes hand in hand with teaching people to communicate.				
				90	WJL	7/16/2013 6:20 PM
		Teaching people confidence goes hand in hand with teaching people to communicate.				
				91	WJL	7/16/2013 6:21 PM
		Teaching confidence				
				92	WJL	7/14/2013 10:15 PM
		Teaching confidence and teaching people communication skills They kind of flip flop. When you teach communication skills, you build confidence. They kind of work together.				
				93	WJL	7/16/2013 6:21 PM
		you build confidence				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				94	WJL	7/14/2013 10:16 PM
		As far as a class goes, as long as you teach people how to communicate, you're teach them how to be confident. As long as people are coming out and they're confident, they're going to be able to communicate with their partners, which in turn is going to make them have a better working relationship in the field. It has really nothing to do with the whole leadership piece, unless the confidence these people have, that you teach them at a basic level, when you're teaching them their classes, then takes them into a leadership role. The more confidence people have in themselves, the further they're going to go in life. The further we're going to go. I think that it starts with communication and the team building skills. Leadership follows for those who are truly interested.				
				95	WJL	7/16/2013 6:21 PM
		Yes, confidence. Definitely confidence				
				96	WJL	7/16/2013 6:21 PM
		confident.				
				97	WJL	7/14/2013 10:16 PM
		They need to be professional.				
				98	WJL	7/14/2013 10:16 PM
		learn communication skills. Good, positive communication skills. Communication skills with their radio. Communication skills with their superiors. Communication skills with children. Communication skills with the elderly can be different than communication skills with ...				
				99	WJL	7/14/2013 10:17 PM
		communication skills,				
				100	WJL	7/16/2013 6:21 PM
		I kind of fall back to the leader piece is something, I think, something that comes down the road.				
				101	WJL	7/16/2013 6:21 PM
		If you're talking about leadership and moving up and being in a supervisory or a captain role or a teaching role, I think that that just comes with experience and with desire from the person. I think that that's something that just kind of ... it falls in line in your career, as you process in your career. The leadership piece more is a chain of events and something that progresses.				

Internals\\Interviews\\Interview #16

Yes	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	0.0833	38			
			1	WJL	7/16/2013 6:22 PM
	Even as someone who has been in school for two years as opposed to someone who did a three- or six-month program, you still can't take knowledge and apply it without experience. If I have the knowledge but I don't have the experience, I can pull the experience from the people around me, even though I am still in a leadership position. It's not a sign of weakness to ask others to help you get what needs to be done done.				
			2	WJL	7/16/2013 6:22 PM
	Even as someone who has been in school for two years as opposed to someone who did a three- or six-month program, you still can't take knowledge and apply it without experience. If I have the knowledge but I don't have the experience, I can pull the experience from the people around me, even though I am still in a leadership position. It's not a sign of weakness to ask others to help you get what needs to be done done.				
			3	WJL	7/16/2013 6:22 PM
	Even as someone who has been in school for two years as opposed to someone who did a three- or six-month program, you still can't take knowledge and apply it without experience. If I have the knowledge but I don't have the experience, I can pull the experience from the people around me, even though I am still in a leadership position. It's not a sign of weakness to ask others to help you get what needs to be done done.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			4		WJL	7/16/2013 6:23 PM
		Delegation maybe. I guess the best way is delegation. Utilize your resources appropriately I guess would be the best way to put it.				
			5		WJL	7/13/2013 6:59 PM
		I think I've gotten a little better at the way I talk to and handle just children and elderly.				
			6		WJL	7/16/2013 6:23 PM
		As a leader I can deescalate the situation				
			7		WJL	7/16/2013 6:23 PM
		As a leader I can deescalate the situation				
			8		WJL	7/13/2013 7:03 PM
		listening to those who are looking to you for leadership if they have questions, comments or concerns.				
			9		WJL	7/16/2013 6:23 PM
		listening to those who are looking to you for leadership if they have questions, comments or concerns.				
			10		WJL	7/16/2013 6:23 PM
		You need everybody to work together to get the ultimate goal completed.				
			11		WJL	7/16/2013 6:24 PM
		they pull from the resources they have around them				
			12		WJL	7/16/2013 6:24 PM
		they pull from the resources they have around them				
			13		WJL	7/16/2013 6:24 PM
		they pull from the resources they have around them				
			14		WJL	7/16/2013 6:25 PM
		It's someone who's up on top and in charge but isn't overbearing and over domineering and doesn't talk down to the people they're working with, which is one of the major bad rules of leadership; someone who talks down to people you're working with.				
			15		WJL	7/16/2013 6:38 PM
		It's someone who's up on top and in charge but isn't overbearing and over domineering and doesn't talk down to the people they're working with, which is one of the major bad rules of leadership; someone who talks down to people you're working with.				
			16		WJL	7/16/2013 6:37 PM
		So disrespect is the worst thing I think of all.				
			17		WJL	7/16/2013 6:25 PM
		So disrespect is the worst thing I think of all.				
			18		WJL	7/16/2013 6:26 PM
		Listening and pulling from your resources.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				19	WJL	7/16/2013 6:26 PM
						Listening and pulling from your resources.
				20	WJL	7/16/2013 6:26 PM
						Listening and pulling from your resources.
				21	WJL	7/16/2013 6:26 PM
						He works well with us and treats us with respect and in that aspect.
				22	WJL	7/16/2013 6:37 PM
						He works well with us and treats us with respect and in that aspect.
				23	WJL	7/16/2013 6:27 PM
						The leadership qualities I expect are pretty much the leadership qualities that I myself would give. I expect the same from anybody else that I would give them. It's like the golden rule. Treat others the way you want to be treated.
				24	WJL	7/16/2013 6:27 PM
						The leadership qualities I expect are pretty much the leadership qualities that I myself would give. I expect the same from anybody else that I would give them. It's like the golden rule. Treat others the way you want to be treated.
				25	WJL	7/16/2013 6:37 PM
						respect
				26	WJL	7/16/2013 6:27 PM
						Of course leadership is someone who can take control of a situation and deescalate a situation.
				27	WJL	7/16/2013 6:28 PM
						Of course leadership is someone who can take control of a situation and deescalate a situation.
				28	WJL	7/16/2013 6:28 PM
						mediator
				29	WJL	7/16/2013 6:37 PM
						I expect a leader to be someone who, and have always expected a leader to be someone who draws from their resources and treats their subordinates with respect and does what they can to improve morale where and when needed.
				30	WJL	7/13/2013 7:08 PM
						You know what's expected of you.
				31	WJL	7/16/2013 6:28 PM
						You need a level of humility, your ability to pull from your resources.
				32	WJL	7/16/2013 6:28 PM
						humility
				33	WJL	7/16/2013 6:28 PM
						You need to be humble enough to accept that you don't know everything.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				34	WJL	7/16/2013 6:29 PM
						Remain open minded. Don't be so close minded
				35	WJL	7/16/2013 6:29 PM
						Humility
				36	WJL	7/16/2013 6:37 PM
						respecting the people around you
				37	WJL	7/13/2013 7:11 PM
						pulling from the resources you have around you.
				38	WJL	7/16/2013 6:30 PM
						treating your subordinates appropriately
Internals\Interviews\Interview #17						
Yes		0.0322	12			
				1	WJL	7/16/2013 6:31 PM
						I think the skill to think two steps ahead, two or three steps ahead of everything because in this hospital everything is about, I would say politics.
				2	WJL	7/16/2013 6:31 PM
						I think the skill to think two steps ahead, two or three steps ahead of everything because in this hospital everything is about, I would say politics.
				3	WJL	7/16/2013 6:31 PM
						Second is the, I would say prioritizing everything. You have to be able to learn how to prioritize every call and every decision that you make.
				4	WJL	7/16/2013 6:31 PM
						proactive instead of being reactive to everything.
				5	WJL	7/16/2013 6:32 PM
						you also have to listen carefully
				6	WJL	7/16/2013 6:32 PM
						They know what to change, when to change and how to change so being a good leader you need to be a good listener from your lower people.
				7	WJL	7/16/2013 6:32 PM
						They know what to change, when to change and how to change so being a good leader you need to be a good listener from your lower people.
				8	WJL	7/16/2013 6:33 PM
						Being proactive
				9	WJL	7/16/2013 6:33 PM
						good listener

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				10	WJL	7/16/2013 6:33 PM
						listen to other people's suggestions or comments
				11	WJL	7/16/2013 6:33 PM
						proactive
				12	WJL	7/16/2013 6:37 PM
						a good listener
Internals\Interviews\Interview #18						
Yes		0.1064	17			
				1	WJL	7/16/2013 6:33 PM
						Leadership skills. The most important thing I learned in leadership, there is something wrong going on in our countries, here in our region, Jordan, Saudi, and Qatar. That is the nature of relationship between the team core itself. Sometimes they deal with us as friends, they make a favor to Qatar.
						During the work, this is a problem. They still until now they didn't ... facts on the ground, during the work ... okay, friendship good, but keep it out of the work. Sometimes you need to work, sometimes you need to be firm with your partner, or the guys that follow, sometimes they did some mistakes. You know we work under stress all the time, in the streets, in traffic accidents. No time to talk to your partner and explain why you ask him to do this, or why you come firm with him.
				2	WJL	7/16/2013 6:33 PM
						They still keep their friendship, or their relation outside of the work interfere with their relation during the work. We are colleagues in the work. We are friends outside, okay?
				3	WJL	7/16/2013 6:34 PM
						To be fair, to be honest all the time, this is the most skills I think I learned during ten years now.
				4	WJL	7/16/2013 6:34 PM
						respect time, respect time, and respect time.
				5	WJL	7/16/2013 6:34 PM
						Respect time
				6	WJL	7/16/2013 6:36 PM
						respect
				7	WJL	7/16/2013 6:36 PM
						So I can say respect is the key for good things and bad things in leadership.
				8	WJL	7/16/2013 6:35 PM
						Given the organization itself and the policy following the organization itself. If the things going on during the organization in personal way, believe me good leadership will be hiding. But there is a good leadership, everywhere there is good leadership. Sometimes, you know, to lead in a good way, some people may not like that or you'll not achieve their goal. Sometimes you'll come to the opposite side with them. It will be keep silent or ...
				9	WJL	7/16/2013 6:36 PM
						Respect your work, respect the people, respect the time

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
				10	WJL	7/16/2013 6:35 PM
						respect the time
				11	WJL	7/16/2013 6:36 PM
						It's respect to your job, respect to your work, it means you will do most of your effort to give anything, everything you can.
				12	WJL	7/13/2013 7:40 PM
						The most important thing that the leader should know, we are health care provider, not transporter.
				13	WJL	7/16/2013 6:36 PM
						Respect your friends, your colleagues are not friends, respect the people, respect the humanity of the patients and his relatives, respect is very important keys for the leader.
				14	WJL	7/13/2013 7:40 PM
						Communication. How to communicate with your colleagues, also with the patient, with the relatives, with the hospitals.
				15	WJL	7/13/2013 7:41 PM
						Communication skills. Believe me, it's very very important.
				16	WJL	7/13/2013 7:41 PM
						If you have good communication skills, you can lead well.
				17	WJL	7/13/2013 7:41 PM
						So communication skills is very very very important to know. From those who would be as a leader, how to communicate.

Internals\\Interviews\\Interview #19

Yes	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	0.0323	28			
			1	WJL	7/13/2013 8:17 PM
					The emphasis of that as a paramedic, you have to accept your own action feedbacks.
			2	WJL	7/16/2013 6:38 PM
					I learned how to lead people
			3	WJL	7/16/2013 6:39 PM
					how to motivate people,
			4	WJL	7/16/2013 6:39 PM
					Transparency is good.
			5	WJL	7/16/2013 6:39 PM
					Don't lie.
			6	WJL	7/16/2013 6:39 PM
					Care about people

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	Be yourself		7		WJL	7/16/2013 6:39 PM
	Do the right thing at the right time.		8		WJL	7/16/2013 6:40 PM
	Do the right thing at the right time.		9		WJL	7/16/2013 6:40 PM
	when you take the responsibility to be with this patient to have his rights.		10		WJL	7/16/2013 6:40 PM
	If I see any neglect, I will not be silent about it, so I find it easy professional and for example, not to be nice if there's something like that.		11		WJL	7/16/2013 6:40 PM
	If I see any neglect, I will not be silent about it, so I find it easy professional and for example, not to be nice if there's something like that.		12		WJL	7/16/2013 6:40 PM
	If I see any neglect, I will not be silent about it, so I find it easy professional and for example, not to be nice if there's something like that.		13		WJL	7/16/2013 6:41 PM
	honesty		14		WJL	7/16/2013 6:41 PM
	accepting criticism,		15		WJL	7/16/2013 6:42 PM
	be responsible		16		WJL	7/13/2013 8:31 PM
	caring about the people who lead or his patients		17		WJL	7/16/2013 6:41 PM
	educating for his people		18		WJL	7/16/2013 6:41 PM
	educating for his people		19		WJL	7/16/2013 6:41 PM
	always caring about others		20		WJL	7/16/2013 6:42 PM
	trust		21		WJL	7/13/2013 8:31 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
	and honesty			22	WJL	7/16/2013 6:42 PM
	transparency			23	WJL	7/16/2013 6:42 PM
	Decision-making			24	WJL	7/13/2013 8:35 PM
	critical thinking			25	WJL	7/13/2013 8:35 PM
	decision-making			26	WJL	7/13/2013 8:35 PM
	research skills that will add			27	WJL	7/16/2013 6:42 PM
	customer care			28	WJL	7/16/2013 6:43 PM

LRNG EMS LDRSHIP: Multinational Qualitative Study
APPENDICES

Appendix F: Findings – Future Needs: Development of Leadership

Education

Node Summary

Node Details

Node Summary

Dissertation

8/6/2013 8:56 PM

Source Type	Number of Sources	Number of Coding References	Number of Words Coded	Number of Paragraphs Coded	Duration Coded
-------------	-------------------	-----------------------------	-----------------------	----------------------------	----------------

Node

Nickname: Nodes\\Future Needs

Classification:

Aggregated: Yes

Document	16	61	3,304	64	
----------	----	----	-------	----	--

Nickname: Nodes\\Future Needs\\Con Ed

Classification:

Aggregated: No

Document	1	2	111	3	
----------	---	---	-----	---	--

Nickname: Nodes\\Future Needs\\Course and or Book

Classification:

Aggregated: Yes

Document	16	59	3,193	61	
----------	----	----	-------	----	--

Nickname: Nodes\\Future Needs\\Course and or Book\\Simulation and or Internship

Classification:

Aggregated: No

Document	6	11	425	11	
----------	---	----	-----	----	--

Coding Summary By Node

Dissertation

8/6/2013 8:53 PM

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Node

Nodes\\Future Needs

Document

Internals\\Interviews\\Interview #01

Yes		0.0081	1			
				1	WJL	7/11/2013 11:24 AM

yeah I mean so and I think it wouldn't be too bad to adopt more from these firefighters leadership training to the EMS system but don't take one to one because it is a totally different organization, the structure is different so we need to adopt it to our system of course.

Internals\\Interviews\\Interview #03

Yes		0.0300	4			
				1	WJL	7/11/2013 1:31 PM

They should increase the leadership classes or management classes

				2	WJL	7/11/2013 1:31 PM
--	--	--	--	---	-----	-------------------

they should focus in that part of leadership and communications

				3	WJL	7/11/2013 1:32 PM
--	--	--	--	---	-----	-------------------

also they have to let the students of the university work the student under stress in some situations during their internship

				4	WJL	7/11/2013 1:32 PM
--	--	--	--	---	-----	-------------------

Like scenarios like practical examinations about leadership evaluations and getting also feedback from them after being evaluated so give some specific courses to the people who is showing excellent of good leadership, send him for like two month, three month training for leadership, so after they can relieve the other groups and that is good.

Internals\\Interviews\\Interview #05

Yes		0.0039	1			
				1	WJL	7/11/2013 1:57 PM

But we should have leadership classes in every program.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Internals\\Interviews\\Interview #06

Yes		0.0274	3
-----	--	--------	---

1	WJL	7/11/2013 3:13 PM
---	-----	-------------------

I think we need a specific books for leadership included in the sequence like emergency 1, emergency 2 and leadership 1 and leadership 2.

2	WJL	7/11/2013 3:21 PM
---	-----	-------------------

I think we need to focus more for leadership and with it apart from our education like leadership and EMS this is topic, small book for leadership

3	WJL	7/11/2013 3:21 PM
---	-----	-------------------

we need to practice it, not just learn it, practice it, train it for leadership, if we have like for example class lab for leadership, lab class for leadership.

Internals\\Interviews\\Interview #07

Yes		0.0201	6
-----	--	--------	---

1	WJL	7/11/2013 8:40 PM
---	-----	-------------------

I don't necessarily know that you can teach leadership. I mean it is not something that you can put into a rubric or you know an outline to say ok if you do these 10 things you are a leader again the measure of leadership is who is following you and that can be good and bad so I think it is trying to as we are developing these curriculums we keep putting in these affective things and I think some of those if we really can track them and find out does somebody really have empathy, I mean how do you really do that because sometimes people have a different response to stress.

2	WJL	7/11/2013 8:42 PM
---	-----	-------------------

I think it is important that you know leaders are people and we have to develop people and that is different than developing a provider

3	WJL	7/11/2013 8:43 PM
---	-----	-------------------

You can't teach leadership

4	WJL	7/11/2013 8:47 PM
---	-----	-------------------

I think even some management classes like just what is management, how to manage these things because whether you are trying to keep the inventory straight in the ambulance or you are trying to do a multi-million dollar budget you need those management skills to be able to have people to support you and do things and you know recognize things, and develop policies and procedures, and to be thinkers

5	WJL	7/11/2013 8:49 PM
---	-----	-------------------

research

6	WJL	7/11/2013 8:49 PM
---	-----	-------------------

legitimate answer to this problem and again that comes back to that critical thinking ability, thinking outside the box so thinking skills, people skills, management skills I think are going to be important and it is hard to teach people skills

Internals\\Interviews\\Interview #08

Yes		0.0049	1
-----	--	--------	---

1	WJL	7/12/2013 9:24 AM
---	-----	-------------------

They in my mind they need to start or establish kind of course that teach people about the leadership.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Internals\\Interviews\\Interview #09

Yes		0.0124	2			
				1	WJL	7/12/2013 10:42 AM

I think that every undergrad degree, every program should have a minimum of three leadership courses, three minimum. Of course tying up everything, bringing everything together because as I said your foundation builds upon, is going to build bigger building, you know if you have a small structure and you keep on building it is very important so if we start off with something strong informing our paramedics what is in the future for them or how they should be looking to other managers and maybe sharing with them because some of these guys one thing that I have noticed that you have all the paramedics very anxious about as new paramedics graduate with degrees

				2	WJL	7/12/2013 10:44 AM
--	--	--	--	---	-----	--------------------

yeah management itself, doing practicals in management, an actual practical in management.

Internals\\Interviews\\Interview #10

Yes		0.0114	1			
				1	WJL	7/12/2013 11:16 AM

Especially when you're training a brand new EMT or medic it's almost like you're raising a child. The things you teach them and the things you show them they're going to imitate and emulate. Those first few, I think, years are the most important because that's the model for how they're going to approach. There's good parents and then there's bad parents and how you raise your child it's like the same correlation. I think the first few years are huge for that.

Internals\\Interviews\\Interview #11

Yes		0.1047	16			
				1	WJL	7/13/2013 4:57 PM

I would say there's not a lot of leadership that is gained through just EMS specifically and maybe in the future that'll be changing, but I haven't seen many programs that in encompassed focused much on leadership at all. It's learned on the job type thing.

				2	WJL	7/13/2013 5:12 PM
--	--	--	--	---	-----	-------------------

Well I think they need to incorporate a leadership module at least from the EMS programs that I've seen. Even if it's not a degree program, because the problem right now is, they have some EMS programs that are degree programs, but still brand new.

				3	WJL	7/13/2013 5:13 PM
--	--	--	--	---	-----	-------------------

Yeah, I would like to see some actual modules put together of didactics for leadership, because it just lacks most of the time.

				4	WJL	7/13/2013 5:13 PM
--	--	--	--	---	-----	-------------------

put together of didactics for leadership, because it just lacks most of the time.

				5	WJL	7/13/2013 5:13 PM
--	--	--	--	---	-----	-------------------

Even when they do include it that's usually not enough. It's only like a block of leadership

				6	WJL	7/13/2013 5:14 PM
--	--	--	--	---	-----	-------------------

include scenario based, because that's pretty much what the job requires, whether it's an office problem, like for example in the Air Force, like I said I went through four or five months of leadership, so I've got firmer grasp and someone that hasn't went through all of that leadership training. You can kind of know, "Ok well, let's try this or let's try that," but it's not all in encompassing.

				7	WJL	7/13/2013 5:14 PM
--	--	--	--	---	-----	-------------------

I don't think that one course or one semester may be enough,

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
			8		WJL	7/13/2013 5:15 PM
		follow-on and continuing leadership training, because most of the time if you look at the requirements per stay of what it takes to renew your license, often time's leadership is not even in there. They focus on the medical, but they don't say anything about leadership. There needs to be increased in leadership awareness and not only in-house, you have your own local training program, but there also needs to be something coming from either a state level or federal level or even an international level, because it needs to be tailored for what region that you're in				
			9		WJL	7/13/2013 5:15 PM
		There needs to be increased in leadership awareness and not only in-house, you have your own local training program, but there also needs to be something coming from either a state level or federal level or even an international level, because it needs to be tailored for what region that you're in				
			10		WJL	7/13/2013 5:15 PM
		There needs to be increased in leadership awareness and not only in-house, you have your own local training program, but there also needs to be something coming from either a state level or federal level or even an international level, because it needs to be tailored for what region that you're in				
			11		WJL	7/13/2013 5:17 PM
		You can come in, whether it can be a PowerPoint or it can be a sit down and talk how are things going with a senior member, it can be in the form of a book, any type of media you can put it in. You may be able to tailor that training for folks. Offer it to where; Ok, well, we have it online. If you just want to do the training online or we have a class that you should go to or we have course that you can go to. It needs to be in a multitude of different ways, because not everyone is responsive to like an interview for example, not everyone's responsible to death by PowerPoint.				
			12		WJL	7/13/2013 5:17 PM
		Start out with different kind of leadership principals, you know, what is Transformational Leadership? That's the big principal here, they incorporated here with the magnet training for people. The big buzz is Transformational Leadership, but they don't say anything about the other leadership styles to the folks. Here they're focus is just one leadership style and I don't agree with that. You need to be able to focus on different leadership styles not just one. Sometimes you need to go from Transformational to Authoritative with folks. It's a fluid process, what works today may not work tomorrow. At least you can start out with pamphlets, you can start out with a national course, but that needs to be ongoing leadership like, "How have you grown and where are your weaknesses?" Per person at least with the managers, you know I have to do it with everyone, but at least start somewhere. For example with your initial line managers and so that they have the tools so where they'll actually know "OK, well if this doesn't work, it's OK to do this." Especially specific to here, you got different cultures.				
			13		WJL	7/13/2013 5:19 PM
		As far as leadership skill with the current or future EMS student, if there students you need to have like for example, if you have leadership 101. Need to have a leadership 201 or 301. Make it as a progressive study, so that they just don't get one leadership course.				
			14		WJL	7/13/2013 5:20 PM
		Some people view it as an extra course or a filler course and I like to see it as a core course, not just an elective, because often times it's fell into elective and by just the nature of the word 'elective' it indicates to me that, you don't have to have it. It should be a mandatory requirement that people learn, at least even though they learn the leadership principles, if they don't want to be a good leader, they are not going to be. It's like, you have to want to be a good leader, and if you don't want to be a good leader, you're probably not going to be a great leader at all.				
			15		WJL	7/13/2013 5:42 PM
		If you turn a blind eye to it then you're not going to be able to solve the issue. It all goes back to EMS leadership, there's not enough training, there's not enough education in it, there's not enough practice.				
			16		WJL	7/13/2013 5:42 PM
		I've never seen hardly ever con ed on leadership at all.				

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

Internals\Interviews\Interview #12

Yes		0.0210	3
-----	--	--------	---

1	WJL	7/13/2013 6:05 PM
---	-----	-------------------

For example, riding up the truck but just the third person, not doing anything. They should observe on what's really going on in the truck.

2	WJL	7/13/2013 6:06 PM
---	-----	-------------------

They should see what's really going on the truck before they get a certificate.

3	WJL	7/13/2013 6:06 PM
---	-----	-------------------

They should learn how to adapt things so if they were going to adopt or they were going to learn it inside the truck by not doing anything, just a third person, in the future they are going to apply it like what they've seen in real-life.

Internals\Interviews\Interview #14

Yes		0.0037	1
-----	--	--------	---

1	WJL	7/14/2013 5:42 PM
---	-----	-------------------

To be able to have those kinds of classes when you first get here or before you get here to just know this is what you're getting into so when you get here you're not overly shocked and you can tweak your abilities so it's not so hard. That would be a really good leadership class is ... how do I word it? It's to teach the people here that just because you may come from a different place doesn't mean you don't think the same.

Internals\Interviews\Interview #15

Yes		0.0304	9
-----	--	--------	---

1	WJL	7/14/2013 5:54 PM
---	-----	-------------------

As far as leadership goes in this aspect, Arlene was a very good leader. She was a strong leader, as far as my educator goes.

2	WJL	7/14/2013 5:58 PM
---	-----	-------------------

even as a basic EMT, there needs to be some strong leadership skills in there because there are times when even a basic is going to be the one that is in control of something.

3	WJL	7/14/2013 10:09 PM
---	-----	--------------------

As far as leadership goes, I think that that is something that people, on an individual basis, chose to strive for. I don't think that it's necessarily something that you can teach somebody, as much as you can find somebody who wants to move up into a leadership position and you can mentor them. I find it difficult to think about a program or a plan or a class that you can take, that would teach you, necessarily, to be a leader. I, again, think that a lot of that comes with experience and desire, verses, I'm going to choose this class to take, because it sounds like it will be a good class take.

4	WJL	7/14/2013 10:09 PM
---	-----	--------------------

Team building, on the other hand, I think is very important.

5	WJL	7/14/2013 10:11 PM
---	-----	--------------------

There's great things you can do with team buildings. They teach people how to work together. How to get along. How to learn that just because there are different personalities, doesn't make it a bad situation. You may think one way and I may think another way, but that's okay. Between the two of us, we may come up with a plan in this situation that works. You're line of thinking may be totally off from the way I view things. When we come together in the back of an ambulance to do a job, those two minds may actually be able to come together with a plan that works for this person.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

6 WJL 7/14/2013 10:11 PM

The team building stuff, I think, is a phenomenal idea for EMS. I think that they need to focus a lot on team building skills. That's just a game. There's all kind of other things that you can do. Not just games. There's actually scenarios that you can get people to work through together to get the to collaborate their minds.

7 WJL 7/14/2013 10:14 PM

I think that EMS classes should teach. They should have a whole chapter on just team building, on teaching people how to work with people. You never know, even from time to time. I could be on a call ... And this has happened. I could be driving somewhere, witness an accident. Because I have the skills I have, will get out and initiate whatever care, whether it's just holding c-spine until another ambulance service comes on. They don't know me, because I'm not in uniform. Yet, I'm able to communicate. I'm able to work with them and understand that they don't have a clue who I am, so don't be offended when they're like, "Woe, woe, woe. What are you doing? Why are you touching the patient?"

8 WJL 7/14/2013 10:14 PM

How to communicate with people. There's just so many different things that you can learn when it comes to team building. Yes, I think it's something that they should have complete piece on in all EMS classes. On how to work together with people that you don't know. How to communicate. How to work through issues. Not everybody gets along together. Sometimes you have to recognize how to work through issues with people. That it's okay to approach somebody and say, "Look, this is how I am. This is what I like to do. How do you do things? Let's get it off from the beginning."

9 WJL 7/14/2013 10:16 PM

As far as a class goes, as long as you teach people how to communicate, you're teach them how to be confident. As long as people are coming out and they're confident, they're going to be able to communicate with their partners, which in turn is going to make them have a better working relationship in the field. It has really nothing to do with the whole leadership piece, unless the confidence these people have, that you teach them at a basic level, when you're teaching them their classes, then takes them into a leadership role. The more confidence people have in themselves, the further they're going to go in life. The further we're going to go. I think that it starts with communication and the team building skills. Leadership follows for those who are truly interested.

Internals\Interviews\Interview #16

Yes 0.0360 3

1 WJL 7/13/2013 7:10 PM

It would've been I think a little bit helpful in my program to have a leadership class. I probably wouldn't have been as timid for the first six months of my career.

2 WJL 7/13/2013 7:11 PM

I think leadership gets thrown just kind of in between the lines so to speak, because it's something that you're going to have to learn. We don't have to teach it right now. You'll learn that when you're in the field sort of thing. A course on management and leadership is specifically but that's just from my experience.

3 WJL 7/13/2013 7:11 PM

Pretty much the same as when you're in a preceptor role. When you're doing your clinicals, you're in a preceptor role. Then at that point you're more concentrated on the leadership aspects. Not necessarily the patient care and all that. It's just the decision-making roles and the critical thinking. How did you come to this conclusion? You didn't know what was going on here so tell me how you came to that conclusion? A critical thinking course maybe or something like that.

Internals\Interviews\Interview #17

Yes 0.0624 5

1 WJL 7/13/2013 7:17 PM

Okay, the course for the EMT takes about three months to finish and of course that includes all the basic stuff, CPR and part of it ... I think the last week we were taught about leadership but not much just because we are only EMTs but I didn't know till I came here that even if you're EMT you can be a good leader so that's why.

2 WJL 7/13/2013 7:17 PM

Like during our last week of the EMT program, I think it only took two or three days for the leadership training because there are times where it's only you as an EMT and another EMT as a partner so we have to learn leadership.

Aggregate	Classification	Coverage	Number Of Coding References	Reference Number	Coded By Initials	Modified On
-----------	----------------	----------	-----------------------------	------------------	-------------------	-------------

3 WJL 7/13/2013 7:25 PM

starting as an EMT they should be able to teach us how to become a good leader

4 WJL 7/13/2013 7:25 PM

It should be part of the course because you'll never know, some of the areas or some of the stations they have a supervisor that is an EMT and he runs the stations well. I would say that leadership should be included starting with the EMTs on that EMT course.

5 WJL 7/13/2013 7:25 PM

The skills on being a leader, that they have to manage, they have to control whatever is going on, they have to manage it as good as they can. I think the two or three day leadership thing that we did back home is not enough, they should probably expand it and elaborate more about leadership.

Internals\Interviews\Interview #18

Yes 0.0457 3

1 WJL 7/13/2013 7:38 PM

The leaders I hope starting from education, leaders and EMS providers, starting from education, like your college here, to learn the people not only the scientific or the scientific information about our job, but the other aspects.

2 WJL 7/13/2013 7:38 PM

So I think it should start during education about the leadership, how to lead the patient, how to lead the bystander, the relatives, even your partners, to learn them how to do this in a positive way, not a negative way. Leadership education should be include something in our region that work is work, you are here to lead. The relationship, the other relationship, especially relationship, keep it outside. We are here on work, as we start our duty, this guy is your colleague, he is not your best friend here. He is your colleague.

3 WJL 7/13/2013 7:40 PM

Respect your friends, your colleagues are not friends, respect the people, respect the humanity of the patients and his relatives, respect is very important keys for the leader. We should know this. During education, during trainer course, during experience, whatever. But they should learn this.

Internals\Interviews\Interview #19

Yes 0.0339 2

1 WJL 7/13/2013 8:34 PM

For the paramedicine I think that they need a lot of emphasis and leadership to show that we are now struggling in the stage of semi-profession. We cannot claim that we are full professional now, because we don't have the conditions honestly, to contribute of professionalism. Leadership will contribute a lot of that.

2 WJL 7/13/2013 8:34 PM

I would like to teach the paramedics how they manage their office and their paperwork. I will teach them the skills that he needs to take in action to decide sometimes the life of the patient. It will be depend on that or prevent the suffering of the patient, it will depend in his decisions, so I would like to teach the skills of decision makers, critical thinking. Skills that it's necessary. Usually, I take it like that.

REFERENCES

References

Aehlert, B. (Ed.). (2011). *Paramedic Practice Today Above and Beyond: Revised Print*. St. Louis, MO: Mosby JEMS Elsevier.

Aitken, P., Legate, P. A., Robertson, A. G., Harley, H., Speare, R., & Leclercq, M.G. (2012). Leadership and Use of Standards by Australian Disaster Medical Assistance Teams: Results of a National Survey of Team Members. *Pre-hospital and Disaster Medicine*, 27(2), 142 – 147.

Al-Shaqsi, S. (2010, October). Models of International Emergency Medical Service (EMS). *Oman Medical Journal*, 25(4), 320-323.

Alexander, M., Weiss, S., Braude, D., Ernst, A. A., & Fullerton-Gleason, L. (2008). The relationship between paramedics level of education and degree of commitment. *American Journal of Emergency Medicine*, 27,830-837.

Barbishanksy, R., M. Views from the field. *Journal of Emergency Medical Services*,
31 (10), 133 – 142

Berger, E., McKenna, M. (2007). The Future of Emergency Care Reports, One Year Later: Assessing the Impact of the IOM. *Annals of Emergency Medicine*, 50(1), 55 – 58

REFERENCES

Brink, P., Back-Petterson, S., & Sernert, N. (2012). Group supervision as a means of developing professional competence within pre-hospital care.

International Emergency Nursing, 20, 76 – 82.

Cage, T. M. (2013). A Model of Teaching Team Leadership. In National Association of EMS Educators. (2013). *Foundations of Education: An EMS Approach* (pp. 275 – 276). Clifton Park, NY: Delmar.

Catlett, C. L., Jenkins, J. L., & Millin, M. G. (2011). Role of Emergency Medical Services in Disaster Response: Resource Document for the National Association of EMS Physicians Position Statement. *Pre-hospital Emergency Care, 15*(3), 420- 425.

College of Paramedics: British Paramedic Association. (2008). *Paramedic Curriculum Guidance & Competence Framework*. Derby, Derbyshire: College of Paramedics.

Cotter, S. (2005, June). Practical Leadership. *Emergency Medical Services, 34*(6), 111.

Creswell, J. W. (2013). *Qualitative Inquiry & Research Design: Choosing Among Five Approaches, 3rd Edition*. Thousand Oaks, CA: SAGE Publications, Inc.

Emergency Room (n.d.). In Merriam-Webster's online medical dictionary (11thed.). Retrieved from: <http://www.m-w.com/dictionary/emergencyroom>

REFERENCES

Evans, B. E., Dyar, J. T. (2010). *Management of EMS*. Upper Saddle River, NJ: Pearson Education, Inc.

Foster, D. T., Goertzen, B. J., Nollette, C., Nollette, F. P. (2011). *Emergency Services Leadership: A Contemporary Approach*. Burlington, MA: Jones & Bartlett Learning.

Garza, M. (2009). EMS in DHS: the Department of Homeland Security recruits EMS leaders. *Journal of Emergency Medical Services, 34(5)*, 76 – 83.

Gienapp, A. (2005, July). Military Leadership: Can its seven core values work for EMS? *EMS Magazine, 37(7)*, 54 – 57.

Giorgi, A. (2009). *The descriptive phenomenological method in psychology: A modified Husserlian approach*. Pittsburgh, PA: Duquesne University Press.

Green, L. V., Kolesar, P. J. (2004). Improving Emergency Responsiveness with Management Science. *Management Science, 50(8)*, 1001 – 1014.

Hagan, T. M. (2012, February). Learning From History: How will you lead EMS into the future? *EMS World, 24* – 25.

Hagen, T.M. (2011, March). The Making of a Leader: NEMSMA sets out to define standard levels, competencies. *EMS World, 36*.

Lester, W., Krejci, D. (2007). Business “Not” as Usual: The National Incident Management System, Federalism, and Leadership. *Public Administrative*

REFERENCES

Review: Special Issue on Administrative Failure in the Wake of Hurricane Katrina, 67, 84-93.

Limmer, D., O'Keefe, M. F. (2012). *Emergency Care, 12th Edition* (E. T. Dickinson, Ed.). Upper Saddle River, NJ: Pearson Education, Inc.

Liong, A. S., Liong S. U. (2010). Financial and Economic Considerations for Emergency Response Providers. *Critical Care Nursing Clinics of North America*, 437 – 444.

Ludwig, G. (2010). Thoughtful Decision-Making for EMS Managers. *Journal of Emergency Medical Services*, Printable Version retrieved March 19, 2013, from www.jems.com.

Ludwig, G. (2009). What's Your Style?: Determine which of the four managers you are. *Journal of Emergency Medical Services*, 24.

Ludwig, G. (2012). Rudy Giuliani Gives 4 Tips for Crisis Management. *Journal of Emergency Medical Services*, Retrieved from: www.jems.com.

Miller, M. G. (2013, Winter). Teaching and Assessing Leadership Skills in the Emergency Medical Services Classroom. *Domain 3: National Association of EMS Educators*, 19 – 24.

Morton, M. J., Vu, A. (2011). International Emergency Medicine and Global Health: Training and Career Paths for Emergency Medicine Residents. *Annals of Emergency Medicine*, 57(5), 520 – 525.

REFERENCES

National Association of EMS Educators. (2013). *Foundations of Education: An EMS Approach: 2nd Edition*. Clifton Park, NY: Delmar.

National Highway Traffic Safety Administration. (2004). National EMS Core Content. Retrieved from:

<http://www.ems.gov/education/EMSCoreContent.pdf>

National Highway Traffic Safety Administration. (2010). National EMS Scope of Practice Model. Retrieved from:

<http://www.ems.gov/education/EMSScope.pdf>

Nielsen, K., Mock, C., Joshipura, M., Rubiano, A. M., Zakaria, A., & Rivara, F. (2012). Assessment of the Status of Pre-hospital Care in 13 Low- And Middle-Income Countries. *Pre-hospital Emergency Care*, 16(3), 381 – 389.

Pollak, A. N. (2011a). *Critical Care Transport*. Sudbury, MA: Jones and Bartlett Publishers.

Pollak, A. N. (2011b). *Emergency Care and Transportation of the Sick and Injured*. Sudbury, MA: Jones and Bartlett Publishers.

Porter, W. J. (2004, June). Everyday EMS Leadership. *Emergency Medical Services*, 33(6), 126.

Powers, R. (2006). Transformation Leadership: A positive approach to EMS management. *Journal of Emergency Medical Services*, 31(4), 74 – 79.

REFERENCES

Royal Embassy of Saudi Arabia: Washington, DC. (2011). *Record Number of*

Saudi Students Now Studying in the U.S. Retrieved from:

<http://www.saudiembassy.net/press-releases/press12011101.aspx>

Sanders, M. J., McKenna, K. (Ed.). (2012). *Mosby's Paramedic Textbook: 4th*

Edition. St. Louis, MO: Mosby JEMS Elsevier.

The World Factbook. (2013). *Central Intelligence Agency*. Retrieved from:

<https://www.cia.gov/library/publications/the-world-factbook/index.html>

von Wyl, T., Zuercher, M., Amsler, F., Walter, B. & Ummenhofer, W. (2009,

November). Technical and Non-Technical Skills Can Be Reliably

Assessed During Paramedic Simulation Training. *Anaesthesiologica*

Scandinavica, 53, 121 – 127.

Williams, D. (2002, March). Sharing the Wealth: Creating Future EMS Leaders

through Effective Management Mentoring. *Emergency Medical Services*,

31(3), 70 – 71.