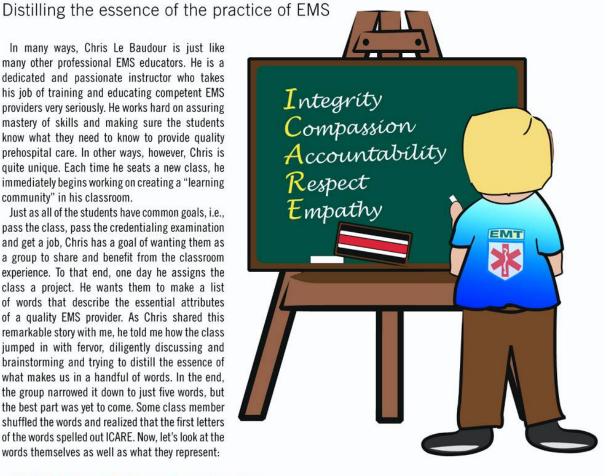


Do You Care Enough to ICARE?

In many ways, Chris Le Baudour is just like many other professional EMS educators. He is a dedicated and passionate instructor who takes his job of training and educating competent EMS providers very seriously. He works hard on assuring mastery of skills and making sure the students know what they need to know to provide quality prehospital care. In other ways, however, Chris is quite unique. Each time he seats a new class, he immediately begins working on creating a "learning community" in his classroom.

Just as all of the students have common goals, i.e., pass the class, pass the credentialing examination and get a job, Chris has a goal of wanting them as a group to share and benefit from the classroom experience. To that end, one day he assigns the class a project. He wants them to make a list of words that describe the essential attributes of a quality EMS provider. As Chris shared this remarkable story with me, he told me how the class jumped in with fervor, diligently discussing and brainstorming and trying to distill the essence of what makes us in a handful of words. In the end, the group narrowed it down to just five words, but the best part was yet to come. Some class member shuffled the words and realized that the first letters of the words spelled out ICARE. Now, let's look at the words themselves as well as what they represent:



must be trustworthy, ethical and conscientious in every aspect of patient care."

INTEGRITY: The quality of possessing and steadfastly adhering to high moral principles or professional standards.

This is the most important quality I believe EMS providers must embrace. We routinely see patients who, for one reason or another, are mentally impaired. Whether they are unconscious, intoxicated, traumatized or hypoxic to the point that they are incapable of making good choices, we must be there to make those choices for them. We must be trustworthy, ethical and conscientious in every aspect of patient care. Just as we protect their personal belongings, we need to protect our patients' privacy. When it is all said and done, we must continually strive to do anything and everything within our capabilities to do what is in the best interest of our patients. If there is any single element of the practice of prehospital medicine that must stand true and fast, it is that we must be people of integrity.

COMPASSION: Sympathy for the suffering of others, often including a desire to help.

Medicine has two distinctly different facets: art and science. Technology and pharmacologic therapeutics represent two of the many elements of the science of medicine. These elements are hard, fast and measurable. On the other side of the equation is the art of medicine, or what might better be termed the heart of medicine—something that is virtually immeasurable. But while the art of medicine may be difficult to quantify, it is still an integral and essential part of our craft, and just as we are charged with using science and technology to the best of our abilities for the benefit of our patients, so we are also charged to treat them with care and compassion.

Sad as it is, we see people at some of the worst times of their lives. Whether it be devastating head trauma, a sudden cardiac arrest, that crippling stroke in the middle of the night or possibly a lethal overdose, we see the suffering of humanity on a daily basis. How can we possibly be compassionate in our care if we don't connect or don't feel for those we care for? Arguably, we cannot.

ACCOUNTABILITY: Being responsible to someone else or others.

Another critical element of the practice of prehospital medicine is that of accountability. While EMS providers



almost always work as a team, we are credentialed as individuals. As such, we are personally accountable for our own actions, specifically for the care we provide to others as part of our work in medicine.

Unlike a sloppy painter who can return to a job site and repaint the trim, or the careless lawn and garden worker who cuts the grass too short, but knows he can add fertilizer next Saturday, we have no such luxuries. Our failures and foibles don't impact the trim or the grass. Ours impact human beings just like us. We must not forget that because we are just people, we are and will always be fallible, and when we make mistakes, there are times those errors may result in the death or disability of another human being. That is a harsh reality we have to accept, but it is a reality that can be mitigated by our being accountable.

As we pursue limiting both the frequency and seriousness of our mistakes, without accountability, there is no learning from those past mistakes. Without that learning, we lose the opportunity for the professional growth that allows us to change behaviors and to limit the repetition of our mistakes. One's medicine does not evolve and mature without accountability.

Last, but by no means least, at no time can we forget to whom we are accountable: our patients.

RESPECT: A feeling or attitude of admiration and deference toward somebody.

As people continue to age, there are a number of events that will likely occur. At some point, people become unsafe drivers and society takes away their car keys, leaving them dependent on others to move them around so they can take care of their life's basic needs and business. Then their health deteriorates until they can't take care of themselves and/or there is no one to care for them, and we put them in an extended care facility. Finally, a significant number of folks will suffer the insult of dementia/Alzheimer's and will lose their minds. Lose your transportation. Lose your home. Lose your mind. In the end, all people have left are their memories and their respect.

We really can't do anything about people's memories, but we sure can do a lot to treat our patients with the respect and dignity they deserve. Call them by their name, not buddy, babe, dude, pal, honey, sport or sweetie. Introduce them to the nurse or doctor who is receiving your short report and assuming responsibility for their care. Keep them comfortable, warm and covered to respect their privacy. And don't forget to be polite. "Please," "Thank you," "May I?" and "I'm sorry" will get you further in your relationship with your patients than you will ever get with some of those fivesyllable medical terms.

EMPATHY: The ability to identify with and understand another person's feelings or difficulties.

I recall once hearing a great OB/GYN lecture, during which the nurse presenter made a comment to the male members of the audience: "Please do not try to comfort a woman in labor with the comment 'I know what you are going through.'

Show You Care With an ICARE Poster

Your organization can show your support of the principles of ICARE through displaying our exclusive ICARE poster. To request a free copy of the poster, e-mail your name, title, agency name and mailing address to nancy.perry@ cygnusb2b.com. The poster will also be distributed at the EMS Magazine booth at EMS EXPO 2008 on a first-come, first-served basis. EMS EXPO is scheduled for October 13-17 in Las Vegas, NV. For more information, visit www. emsexpo2008.com.

The ICARE poster is sponsored by EMS Magazine and the National Association of EMTs.

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Unless you have ever squeezed a bowling ball out of one of your nostrils, you have no clue what she is going through." Excellent visual imagery allowed her to drive that point home. To the best of my memory, I have never used that errant phrase.

Empathy, or what is sometimes termed "walking in another's shoes," is a very unique state of mind. For a brief moment, we step out of our life and into someone else's, trying to see things as they see them rather than as we see them.

What is it like to have your heart suddenly double or triple in speed and feel like it's going to explode out of your chest? How scared are you when you wake up in the middle of the night and can't feel or move your right leg or arm, and spit runs out of the drooping corner of your mouth?

Being empathetic is a huge part of our humanity as caregivers, as we recognize and embrace the reality that providers and patients are all just the same; we are all people.

Conclusion

In a California classroom, inspired by the leadership and instruction of Chris Le Baudour, 36 young men and women on their way to becoming EMS professionals put their heads together and came up with an incredibly simple and elegant way to sum up the driving principles in our profession in the form of ICARE. I will go on record as saying that I personally consider this a watershed event. Nor does the irony of having something so incredible created by people who are yet to be in our profession escape me.

If all that we think, say and do in regard to our patient care is driven by the five elements of ICARE, I just can't see how we can go wrong or our medicine go awry.

When I receive my printed poster of ICARE (see sidebar above), I will immediately place it in the front of my classroom, and I will be proud to let people know that I care enough about what I do in EMS to embrace what ICARE represents. Do you care enough to ICARE?

Until next month... ■

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