



VITALS

A Weekly Safety Newsletter For Medical Transport Professionals

Mike Szczygiel (Segal)
888-969-8033
meszczygiel@thomcoins.com

An Unsettling Settlement 2



It is unrealistic to think that reading my article, which was based on some articles that I read, can give enough information to make a sound judgment about this event. However, the title of this article denotes that I have made a value judgment about the event because I find the settlement "unsettling." My level of discomfort with this event has nothing to do with money.

I am saddened that a man with schizophrenia didn't get adequate care to treat this terribly difficult disease, or had an acute exacerbation. Clearly, I don't know the particulars of his condition, but I do know there are schizophrenic homeless people. The difficulties of homelessness added to schizophrenia can create a frightening presentation. Is it possible that this man scared the police? Was the force they used mean-spirited, or it was just a primal reaction to what they perceived as a serious threat? Was fear experienced by the medics heightened by their, perhaps subliminal, perception of the level of fear the police were showing? Were the medics' actions based on survival instincts, which overwhelmed, or at least impaired, their reasoning abilities?

Memory is a reconstructive process. With multiple people involved, there are multiple reconstructions, all of them taken place after the fact, and in contexts that can never reproduce everything that occurred at the time. The sights, sounds, smells, time of day and physical environment are different. The emotional component of intellectual processing and the manner in which conclusions are developed are also different.

An obvious and reasonable conclusion for an article like this is to focus on documentation at each level of a patient encounter, in order to minimize reliance on memory. The need for a precise, complete documentation is also self-evident. But instead of pointing out the obvious, let's conclude with what I find "unsettling." I can understand the negligence and wrongful death components of this case. However the fact that an attorney thought up a "discrimination against a person with a mental illness" charge troubles me. If everything had been done correctly in this case, absent a detailed exam by a physician, it could not be determined that this man had a mental illness. The expert's use of the phrase "deliberate indifference" implies to me a capability to discover the motivations, intentions and values held by practitioners. Can't people who want to do the right thing make mistakes?

We all have obligation to learn from our mistakes, and it's a wonderful opportunity to learn from the mistakes of others. Have you had any near misses similar to this case? Did you learn from them?

Sponsored By:  **THOMCO**

This publication is provided for information purposes only and is not intended as a complete or exhaustive source of compliance or safety information. This "Safety Brief" is advisory in nature and does not warrant, guarantee, or otherwise certify compliance with laws, regulations, requirements, or guidelines of any local, state, or Federal agency.