

Mapping the Future of EMS

NAEMT Annual Report 2013



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OUR MISSION, VISION & VALUES



Our Mission

The mission of the National Association of Emergency Medical Technicians is to represent and serve EMS practitioners, including Paramedics, emergency medical technicians and emergency medical responders, through advocacy, educational programs and research.

Our Vision

NAEMT is the national leader in creating solutions to the challenges facing EMS practitioners.

Our Values

We believe:

- EMS is a distinct and essential service to the public and a fundamental component of our nation's health care system.
- All patients are entitled to high quality and safe medical care delivered by qualified EMS practitioners.
- All EMS practitioners are entitled to a safe, healthy and respectful work environment.
- All EMS practitioners are entitled to adequate and equitable compensation.
- Professional education, national education standards and EMS research are essential to the consistent delivery of high quality, evidence-based medical care.
- Each community should determine the EMS delivery model that best meets their needs and resources.
- Collaboration within the EMS profession is essential to addressing the key challenges facing EMS.

We shall:

- Represent the views and concerns of all EMS practitioners regardless of delivery model.
- Conduct all NAEMT business with integrity and transparency, and adhere to the ethical standards of our profession.

MESSAGE FROM THE PRESIDENT



Don Lundy, BS, NREMT-P
NAEMT President

It is an exciting time to be in EMS and a great time to be a member of NAEMT! Looking back at the issues we addressed, the actions we took, and the events that we held this past year, we can feel proud that our association is “mapping the future” for the EMS profession. The changes taking place in our nation’s

healthcare system are creating a new future for EMS – a future that includes new opportunities and new challenges. By helping our members understand and prepare for these changes, we can – together – map the future of our profession for the benefit of all practitioners, the patients we serve, and our communities.

To ensure that EMS has the infrastructure, equipment and training needed to successfully participate in this new future, NAEMT strongly advocated for passage of the Field EMS Bill (*H.R. 809; Field EMS Quality, Innovation and Cost-Effectiveness Improvement Act*). This proposed legislation is gaining support from state EMS associations, national emergency medical organizations, and members of Congress. This bill represents the first time that our profession has ever attempted to map its own future, like many other professions have done.

We advocated for this bill and other legislative priorities at EMS On The Hill Day, in Washington, D.C. This “snowquestration,” as it became known, was a testament to our EMS convictions. The March 2013 snowstorm that caused a city-wide shutdown in our nation’s Capitol could not deter our EMS participants from meeting with nearly 100 members of Congress to educate them on our challenges, and encourage their support of key legislation.

We supported our advocacy efforts by taking strong, widely publicized positions on *EMS as an Essential Public Function and Protecting EMS Patient Safety and Quality Information*, which encourages state adoption of peer review protection legislation and agency participation in Patient Safety Organizations.

High-quality education is a core value of our association. We continued to advocate for strong national education standards, and developed and presented education programs that measurably improve EMS. Three new courses were completed in 2013 – *Law Enforcement and First Response Tactical Casualty Care, Principles of Ethics and Personal Leadership, and the NAEMT Instructor Course*. The members

of our association who serve on our education program committees must be thanked for their work in developing, writing and editing our excellent course materials. In 2013, our education programs took flight with nearly 70,000 students taught in over 50 countries!

Recognizing the growing trend of Mobile Integrated Healthcare (MIH) and Community Paramedicine (CP), a new committee was established to help our members understand this trend and the opportunities and challenges that will develop as EMS transforms in response to our changing healthcare system. In 2013, this committee worked in collaboration with many national EMS organizations to conduct a survey to better understand this trend and its growth across the country.

“We cannot operate alone; we cannot operate in silos. We must all work together to strengthen EMS for our patients and our communities.”

- Don Lundy, NAEMT President

I am quite pleased to report that the level of collaboration among national EMS organizations has never been greater. On so many initiatives, NAEMT is working with other influential national EMS groups to address the key challenges we face as a profession. Together, we’ve brought EMS issues to the steps of Congress and those federal agencies with jurisdiction over EMS. We’ve prepared resources to help our EMS profession with fitness and disaster preparedness, and we’ve begun developing a model interstate compact to address emergency deployment of EMS personnel across state boundaries. Yes – practitioners, managers, educators, medical directors, and state officials – are now working together to map our future!

None of this could be happening without **YOU**, our members! Whether you serve on an NAEMT committee, or as a member of the NAEMT faculty; whether you serve as a state or regional coordinator or a member of the affiliate advisory council, whether you are an individual member or part of an agency membership, **YOU** matter. **NAEMT exists for you and because of you.** On behalf of the NAEMT Board of Directors, thank you so much for your support. It is my personal honor to work on your behalf.

It’s a great time to be in EMS and a great time to be part of NAEMT. I look forward to working with you in 2014 as we – together – “map the future” of EMS.

ADVOCACY



The purpose of NAEMT's Advocacy program is to represent our members on issues that impact the EMS work environment and the ability of EMS practitioners to effectively serve their patients. We advocate to advance the interests of our profession and our patients. Through advocacy, we help ensure that the EMS perspective is understood and incorporated into the policies, plans and programs of our government and other national institutions. We voice our concerns when actions are being considered that would have an adverse effect on our members and their patients. And, we promote EMS professionalism and our image within the EMS and medical communities.

NAEMT's Advocacy Priorities

2013 saw sweeping changes in our nation's healthcare system that had not been seen for decades. Implementation of the Patient Protection and Affordable Care Act – and its impact on healthcare insurance and delivery – soon became the topic of daily media coverage. For EMS, it created new opportunities to map out the role of our industry and profession within the changing healthcare environment, and an even greater recognition of the importance of collaboration among all EMS stakeholders. These changes influenced the advocacy priorities and activities for our association.

H.R. 809 | Field EMS Bill

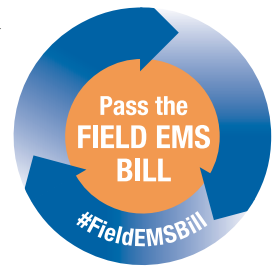
On January 27, 2013, the NAEMT Board of Directors unanimously voted for our association to take the lead in supporting passage of **H.R. 809**, the *Field EMS Quality, Innovation and Cost-Effectiveness Improvement Act*, also known as the “Field EMS Bill.” This decision was taken in direct response to members consistently citing the lack of state and federal funding for EMS as one of the key challenges they face in delivering quality care to their patients.

The Field EMS Bill was originally introduced in the U.S. House of Representatives in 2011, and reintroduced in 2013 by U.S. Representative Larry Bucshon (R-IN), to provide a path toward the vision outlined by the 2006 Institute Of Medicine report, *Emergency Medical Services: At the Crossroads*. The report identified systemic problems in EMS and noted that, while fire and police first responders have several targeted federal support programs, there is no dedicated federal funding stream for field EMS practitioners to ensure their capability to respond to medical emergencies as part of a coordinated emergency care system. In many

areas of the nation, EMS services are highly fragmented, poorly equipped and insufficiently prepared for day-to-day operations, let alone natural or man-made major disasters.

In September 2013 at the Annual Meeting in Las Vegas, Nev., NAEMT kicked-off the Field EMS Bill Co-Sponsor Campaign. The purpose of the campaign was to secure as many co-sponsors as possible for the bill in the U.S. House of Representatives in an effort to secure a hearing on the bill with the House committee to which it was assigned for review. At the time of print, the campaign was credited with 27 U.S. House co-sponsors and endorsements from 46 EMS organizations. This could not have been accomplished without the hard work of NAEMT's Field EMS Bill Steering Committee and Advocacy Committee, as well as our 42 state advocacy coordinators.

A new Field EMS Bill Advocate of the Year Award was also developed to recognize individuals who have demonstrated an outstanding commitment to the bill's passage by educating elected officials, the EMS community, larger medical community, and the public about the value of the bill. A companion award, the Field EMS Bill Legislator of the Year, would be presented to recognize the contributions and support of a single member of Congress.



H.R. 3979 and S. 1798 | Protecting Volunteer Firefighters and Emergency Responders Act.

NAEMT actively supported this bipartisan legislation, introduced by U.S. House Representative Lou Barletta (R-PA) and Senators Mark Warner (D-VA) and Joe Manchin (D-WV), which would exempt emergency response agencies from a requirement to offer health insurance to their volunteer firefighters and emergency medical personnel. The legislation would make it clear that fire and EMS agencies would not be required to offer volunteer personnel health insurance, even if they receive other nominal benefits.

H.R. 235 | Veteran Emergency Medical Technicians Support Act of 2013

Introduced by Representatives Adam Kinzinger (R-IL) and Lois Capps (D-CA), H.R. 235 passed in the U.S House of Representatives on February 12th. H.R. 235 amends the Public Health Service Act, which directs the Secretary of Health and Human Services (HHS) to establish a demonstration program for states with a shortage of EMTs. This program would help streamline state requirements and procedures to assist veterans, who completed military EMT training while serving in the Armed Forces, meet state EMT certification, licensure, and other requirements. NAEMT worked diligently on this legislation, and passage would not have been possible without the extraordinary efforts of our Military Relations Committee and state advocacy coordinators.

EMS On The Hill Day | March 6, 2013

This fourth annual event, hosted by NAEMT, is the only national EMS advocacy event that is open to all EMS professionals. EMS representation from across the nation demonstrated the potential of our national strength in bringing our legislative priorities to the forefront on Capitol Hill.

A snowstorm that closed most Washington, D.C. government offices did not deter the 195 EMS professionals from 37 states, the District of Columbia and Puerto Rico from making the most of EMS On The Hill Day. The “snowquestration,” as it became known, provided an excellent backdrop for the commitment of our EMS visiting delegations. In spite of the storm, EMS participants found the congressional offices that were open and soldiered through all obstacles to meet with their U.S. Senators, House Representatives and respective



staff to educate them on EMS, the essential function we provide to our communities, the challenges we face in doing so, and how they can support EMS through legislation.

At the reception held on the evening of March 6th, U.S. Representative Tim Walz (D-MN) was recognized for his leadership of the EMS Caucus.

EMS On The Hill Day participants asked legislators for support on the following priorities:

- Co-sponsorship by House members of the Field EMS Bill, H.R. 809 (the Field EMS Quality, Innovation and Cost-Effectiveness Improvements Act);
- Support in the U.S. Senate for passage of The Veteran Emergency Medical Technician Support Act, H.R. 235, which passed the House earlier in February; and
- Join the EMS Caucus.

Mapping the future of Mobile Integrated Healthcare and Community Paramedicine (MIH-CP)

In early 2013, the NAEMT Board established a new Mobile Integrated Healthcare and Community Paramedicine (MIH-CP) Committee to:

- Conduct an extensive review of the information, research and position papers published on the subject of MIH and CP and share relevant information on this subject with our members; and
- Develop and implement actions to help prepare EMS practitioners and EMS agencies to establish MIH and CP programs in their local communities and respond to the emerging accountability-driven health care system.

President Don Lundy appointed members of the association to this committee and asked other national EMS organizations to appoint liaisons to this committee, resulting in a collaborative effort between NAEMT and nine other organizations.

One of the first major projects undertaken by the committee was a national survey on MIH and CP programs. Over the summer of 2013, NAEMT’s MIH-CP Committee collaborated with the other member organizations of the Joint National EMS Leadership Forum (JNEMSLF) to conduct a survey to better understand the extent and characteristics of MIH and CP programs across the country and help all of us in EMS to develop strategies and policies to support them. Nearly 4,000 responses to the survey were received. The results of the survey were distributed to all NAEMT members and EMS organizations on November 5th.

State Advocacy Coordinator Network

Since its establishment in 2011, the NAEMT State Advocacy Coordinator (SAC) network has grown to include coordinators from a majority of our 50 states, including the District of Columbia and Puerto Rico. The SAC network helps NAEMT members build support within their states for national advocacy efforts, and provides advice and guidance to members interested in becoming more actively engaged in advocacy. This network has helped us extend our advocacy reach from coast to coast.

Responsibilities of our SACs include: conducting state outreach to encourage and support NAEMT member participation in national EMS advocacy efforts; updating members on the status of pending national legislation and regulation; coordinating visits to the local district offices of U.S. Senators and House Representatives to educate them on issues that affect delivery of EMS in their communities; building relations with the state EMS office and state EMS association(s); and coordinating state involvement in national advocacy campaigns.



Positions and Comments to Congress

In submitting a Position Statement or Letter of Comment, NAEMT takes a stand on issues important to the EMS profession. These statements are distributed within the EMS and medical communities, as well as to federal agencies and the media.

NAEMT position statements, letters and comments, are posted in the Advocacy section of the NAEMT website.

Patient Safety and Quality Information

February 2013: NAEMT adopted “Protecting EMS Patient Safety and Quality Information,” a position affirming that all EMS agencies should have access to – and be able to use – evaluation mechanisms necessary to improve the delivery of emergency patient care. It recommended that states with peer review protection laws should review the laws to ensure EMS agencies and their personnel receive the same peer review protection afforded to physicians, nurses and other healthcare providers in their states.

EMS as an Essential Public Function

June 2013: NAEMT adopted a position statement calling for local, state and federal government authorities to share the responsibility for funding EMS and integrating EMS in our nation’s preparedness, response and recovery infrastructure. This statement has been used in advocating for passage of H.R. 809, the Field EMS Bill.

Support for EMS Funding in Federal Budget

July 2013: NAEMT’s letter requested that Congress include funding for the EMS programs and activities outlined in the FY 2014 Labor/HHS/Education, Transportation/ HUD, and Homeland Security bills. It noted that efforts to improve healthcare delivery must include EMS, and ensure that funding is available to address the full continuum of emergency care.

Opposition to Increase Legal Truck Size

July 2013: NAEMT sent letters to Congressional leaders opposing any proposed legislation to increase legal truck size and weight limits because of serious safety risks. Concern over public safety and the safety of EMS practitioners was cited.

Call for a New CMS Task Force and Patient-Centered Reimbursement

September 2013: On behalf of all EMS practitioners, NAEMT provided comment to the Center for Medicare and Medicaid Services (CMS) on the proposed rule regarding collection of data for Medicare reimbursement. NAEMT called for a new CMS task force to develop a patient-centered reimbursement model because the current transportation-centered reimbursement model does not support effective patient care.



The mission of NAEMT education is to improve patient care through high-quality, cost-effective, evidence-based education that strengthens and enhances the knowledge and skills of EMS practitioners. This mission supports one of our core values that professional education, national education standards, and EMS research are essential to the consistent delivery of high-quality, evidence-based medical care.

NAEMT's Education Philosophy

NAEMT education emphasizes critical thinking skills to obtain the best outcomes for patients. We believe that EMS practitioners make the best decisions on behalf of their patients when given a sound foundation of key principles and evidence-based knowledge. Our belief drives our education programs to provide students with the best possible learning experience.

NAEMT education programs are developed by collaborative teams of clinicians, EMS educators, and

medical directors. Our teams review current publications relevant to our course content and incorporate the latest research, newest techniques and innovative teaching approaches. New programs and major revisions of current programs are field tested to ensure their relevancy and appropriateness. All course content is reviewed and updated at least once every four years to keep up with advances in the field and feedback from participants. We are committed to this philosophy in developing and implementing all of our education programs.

Continuing Our Mission to Raise Global Standards of Education Excellence.

NAEMT began educating EMS practitioners in 1983 with the introduction of PreHospital Trauma Life Support (PHTLS). In 1999, Advanced Medical Life Support (AMLS) was launched, followed by Pediatric Prehospital Care (PPC) in 2001. PPC was a precursor to Emergency Pediatric Care (EPC) launched in 2007. NAEMT began offering Tactical Combat Casualty Care (TCCC) under the auspices of PHTLS in 2010. The EMS Safety Course was established in 2011. In 2013, Law Enforcement and First Response Tactical Casualty Care (LEFR-TCC) launched, as well as the industry's first EMS ethics and leadership course, Principles of Ethics and Personal Leadership (PEPL). Today, we teach nearly 70,000 students in over 50 countries. Our success is attributed to our dedicated education program committees, the members of which contribute countless hours to develop some of the finest EMS curriculum available. A network of volunteers, serving as regional and state coordinators, affiliate faculty, course site coordinators and instructors, support these committees. Without the contributions of these committed volunteers, our accomplishments over the last 30 years would not have been possible.



Advanced Medical Life Support (AMLS)



Emergency Pediatric Care (EPC)



EMS Safety



Principles of Ethics and Personal Leadership (PEPL)



PreHospital Trauma Life Support (PHTLS)



Tactical Combat Casualty Care (TCCC) & Law Enforcement & First Response Tactical Casualty Care (LEFR-TCC)

Advanced Medical Life Support (AMLS)

2013 Courses: 1,054 / Students: 11,926

The Advanced Medical Life Support (AMLS) program offers both a powerful assessment tool and valuable experience to EMS practitioners. Endorsed by the National Association of EMS Physicians, the 16-hour AMLS course is available in a traditional, 2-day classroom format, or a hybrid format that is 8 hours of online content, followed by 8 hours of face-to-face skill-building stations. Key components of the AMLS assessment process include a practitioner's critical thinking and symptom recognition from past experiences and training, while identifying the patient's cardinal presentation.



The AMLS hybrid option provides flexibility to both course coordinators and students. In 2013, an 8-hour refresher course was completed and made available to EMS course sites. Global growth of AMLS continued this past year, with new programs established in Brazil, Ireland, Japan, The Netherlands, Spain and the United Kingdom.

EMS Safety

2013 Courses: 167 / Students: 1,839

In its third year, the award-winning EMS Safety course continued to expand to new course sites across the country. EMS Safety is the only national and most comprehensive education program of its kind that teaches techniques on how best to achieve safety on the job. The course works to reduce the instance of on-the-job death and injury in EMS by providing practical and innovative education that is designed to increase awareness and enhance the safety of EMS practitioners at all levels. This program was also introduced in Aruba and Japan.

Emergency Pediatric Care (EPC)

2013 Courses: 240 / Students: 2,596

EPC provides a unique, advanced and in-depth scientific approach to the emergency care of pediatric patients, offering techniques that can help EMS practitioners rapidly and accurately assess life-threatening situations using the Pediatric Assessment Triangle (PAT), and incorporating family-centered care throughout all scenarios. New EPC Transition Courses, offered through a 4-hour webinar series, enable accredited instructors from other pediatric programs to become recognized as EPC instructors.

In 2013, the course was enhanced by the development of a special module for use on Day 2 of the EPC hybrid course to provide a review of the Day 1 online course content, and a step-by-step instruction sheet for coordinating a hybrid EPC course. EPC was also introduced in Peru and Puerto Rico.

NAEMT Instructor Course

In 2013, work was completed on a new comprehensive course to provide instructor candidates with the basic training and information needed to develop as an instructor for any of NAEMT's education programs. This new 6-hour online course was created to provide a more streamlined and affordable entry to becoming an NAEMT Instructor. The course covers all of the fundamental knowledge in previous instructor courses for NAEMT's education programs, eliminating redundancy and reducing the cost of instructor training. Course modules include NAEMT education philosophy; adult education and learning methodology; methods to address common classroom problems; best practices for classroom and hybrid courses; requirements for becoming and maintaining instructor status; the relationship between the NAEMT Instructor Course and the instructor requirements for each NAEMT education program; and the basic principles and requirements for coordinating an NAEMT course.



Principles of Ethics and Personal Leadership (PEPL)

2013 Courses: 5 / Students: 48

PEPL was launched in 2013 to provide EMS practitioners and Mobile Integrated Healthcare (MIH) practitioners at all levels with the necessary knowledge and skills to effectively interact with patients and their families, other medical personnel, co-workers, supervisors and community residents at large. This 16-hour course covers: personal and professional core values; ethics; decision-making; duty to serve; strategies for conflict resolution; and ambassadorship for the profession, their agencies, and the community at large. Developed in collaboration with the International Public Safety Leadership and Ethics Institute (IPSLEI), the first PEPL course was held in November in Ft. Worth, Texas.

PreHospital Trauma Life Support (PHTLS)

2013 Courses: 3,312 / Students: 41,802

Developed in cooperation with the American College of Surgeons Committee on Trauma, and recognized as the global standard for prehospital emergency trauma care, PHTLS offers a unique approach to trauma care, promoting critical thinking and addressing multi-system trauma for the best patient outcomes. Work began on the 8th Edition of the PHTLS course materials. On the international front, new programs were launched in Singapore, and agreements were made with Jordan and Venezuela.

PHTLS sponsored the Scott B. Frame Memorial Lecture, at which Dr. Karen Brasel, representing the American College of Surgeons, spoke on the history of Advanced Trauma Life Support (ATLS), its relationship to other trauma courses – specifically PHTLS – and what we could expect in the future.



Tactical Combat Casualty Care (TCCC)

2013 Courses: 273 / Students: 3,668

The only TCCC course endorsed by the American College of Surgeons, NAEMT's TCCC course features the Committee on Tactical Combat Casualty Care's (CoTCCC) curriculum, with instructors highly trained in both PHTLS and TCCC. The course is designed for military medics, corpsmen and pararescuemen who are preparing to deploy in support of combat operations. Fully compliant with CoTCCC guidelines, the course was developed to customize the principles of good trauma care for successful use on the battlefield. NAEMT's TCCC course was taught in 12 countries, including new sites in Sri Lanka and the United Kingdom, which were launched in 2013.



Law Enforcement and First Response Tactical Casualty Care (LEFR-TCC)

2013 Courses: 50 / Students: 701

In June 2013, the LEFR-TCC course was launched. Developed by PHTLS, in collaboration with the Denver Health Department of EMS Education and the Denver Police Department Metro/SWAT unit, this 1-day course combines the principles of PHTLS and TCCC to teach public safety first responders (police and other law enforcement officers, firefighters, and other first responders) the basic medical care interventions that will help save an injured responder's life until EMS practitioners can safely enter a tactical scene. Participants learn life-saving medical actions such as bleeding control with a tourniquet, bleeding control with gauze packs or topical hemostatic agents, and opening an airway to allow a casualty to breathe.

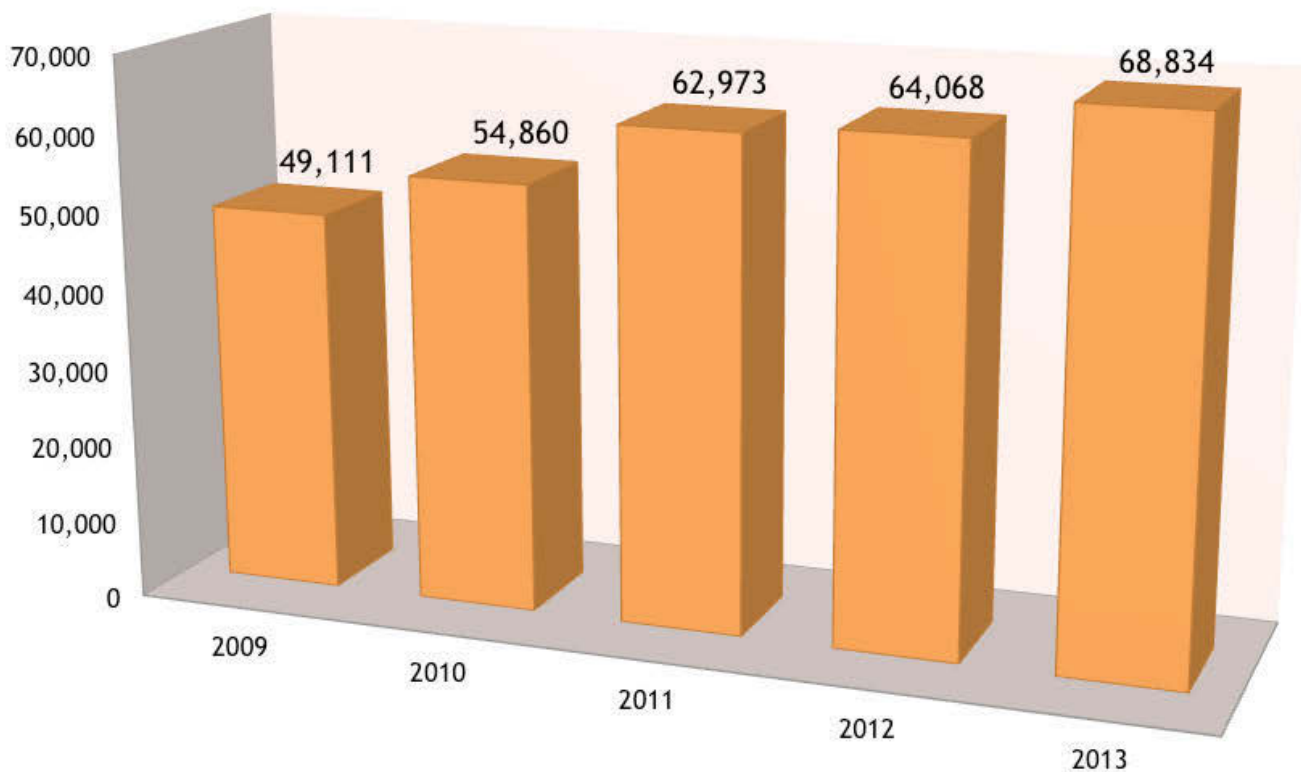


World Trauma Symposium

Through the second World Trauma Symposium, presented at EMS World Expo in Las Vegas, Nev., our position as the global leader in prehospital trauma education was reinforced. Developed by the PHTLS Committee, the symposium extends the PHTLS philosophy of critical thinking as the foundation for quality care to an international forum. The program brought together internationally recognized experts to discuss diverse opinions and controversies in prehospital trauma care, and provide the most up-to-date information on new trauma care techniques and protocols, lessons learned, and trends.

The program attracted Paramedics, emergency physicians, trauma surgeons, EMS educators, emergency room nurses, trauma nurse coordinators, and other medical professionals seeking the best knowledge and information in prehospital trauma care.

Student Totals for Last 5 Years



MEMBERSHIP



As the only national association that represents and serves the professional interests of all EMS practitioners, NAEMT is focused on helping members to “map the future of EMS” - by providing relevant information on industry trends and assisting our members as they navigate the opportunities and challenges that these trends present.

NAEMT Strategic Goals: Where Do We Stand?

The NAEMT Board of Directors adopted our current strategic plan covering 2012-2014 in December 2011. The plan was developed directly from survey responses received from members. Following are the goals established in the plan and our progress in achieving these goals as of the end of 2013.

GOAL: Recruit and retain 10,000 full NAEMT members.

On January 1, 2012, NAEMT's full membership totaled 7,749. As of December 31, 2013, that number had increased to 8,832. NAEMT's Membership Committee continued to identify new member benefits and other incentives to encourage new members and member retention.

GOAL: Develop and implement strategies to address key EMS challenges identified by our members.

1. To address the issue of recruitment and retention in EMS, NAEMT participated in a National Highway Traffic Safety Administration (NHTSA)-funded project led by the National Association of State EMS Officials (NASEMSO) to develop a reporting tool that state EMS offices can use in their licensing process to capture information on EMS employment. NAEMT also discussed with the Department of Labor the expansion of the categories currently used to collect data on EMS occupations.
2. On another difficult issue, license reciprocity, NAEMT participated in a Department of Homeland Security (DHS)-funded project led by NASEMSO to develop an interstate compact (agreement) to recognize EMT and Paramedic licenses across state lines. This model interstate compact for EMS licensure was targeted for completion in 2014.

GOAL: Develop and sustain relationships with institutions and organizations that advance our advocacy efforts.

NAEMT has made great strides in building and furthering relationships with our federal partners at NHTSA's EMS Office, the DHS's Office of Health Affairs, Federal Emergency Management Agency (FEMA), and with the Department of Health and Human Services (DHHS) Assistant Secretary for Preparedness and Response. We routinely work with national and state EMS organizations on many fronts. Forty-four organizations endorsed the Field EMS Bill, and many of these same organizations supported EMS On The Hill Day. NAEMT also maintained formal relationships with over 40 national organizations. Federal agencies and organizations invited us to participate in important briefings, and our advocacy issues and accomplishments have been presented to multiple levels of government.

GOAL: Increase participation at EMS On The Hill Day to at least 300 (to include representation from every state, the District of Columbia and Puerto Rico). While participation goals have not yet been achieved, members across the country are educating their local representatives and communities, and establishing relationships with their federal elected leaders at their district offices. Our marketing and outreach for EMS On The Hill Day will continue and expand as we work to achieve this goal.



GOAL: Streamline our instructor process to make it more affordable to serve as an NAEMT instructor.

The new fully online NAEMT Instructor Course was specifically designed to achieve this goal by eliminating the duplication found in the instructor courses for each of our education programs. The course includes new sections on teaching methodologies, classroom applications, skills stations, and best practices. Completed at the end of 2013, this 6-hour course is easily accessed and very affordable, allowing course sites to offer new NAEMT courses with minimal costs. In the words of one educator, “It provided a much greater depth than I had imagined... I think it is an excellent program on how to teach, not just for NAEMT’s classes but for teaching anything to adults.”

GOAL: Develop and implement strategies to increase access to NAEMT courses.

Each of NAEMT’s education program committees worked closely with their networks of regional and state coordinators and affiliate faculty to open new course sites in the United States and abroad. To better understand the educational needs of our Latin American education partners, NAEMT conducted a workshop during the 2013 Annual Meeting in September. Over 40 representatives from Latin America shared their thoughts about the challenges facing EMS in their countries and ways in which NAEMT might be able to help. To increase the number of TCCC instructors, the PHTLS Committee initiated a project to partner with PHTLS course sites to conduct combined TCCC provider/instructor courses. Over 80 PHTLS course sites signed up to participate.

With the support of our members, we will continue to work towards achieving these goals throughout the coming year.

New NAEMT Member Benefits

NAEMT Individual Membership

The low annual cost of individual membership returns unmatched benefits in terms of cost savings, including complimentary and discounted continuing education, and other items that are purchased regularly. NAEMT added new benefits to enhance the value of membership. The following benefits were added in 2013:

- *Journal of Special Operations Medicine (JSOM)* and *Advanced Tactical Paramedic Protocol* Handbooks – Members receive 15% discount off the annual subscription price. *JSOM*, the only quarterly peer-reviewed medical journal indexed in the National Library of Medicine’s PubMed, transcends the boundary between military and civilian medicine by bringing ideas and techniques to the civilian tactical emergency medical support (TEMS) provider.
- Hertz Car Rental – Members receive a discount of up to 20% on Business Travel and Leisure rates, and up to a 15% discount on International rates, guaranteeing the best rates available. Members also receive complimentary Hertz #1 Club Gold program membership.



NAEMT Agency Membership

This new form of membership replaced NAEMT’s previous Squad member program. Agency Membership provides EMS agencies with an affordable supplement to their employee benefits package, plus a full package of discounts on products and services to help agencies lower operating costs and improve productivity. At the end of 2013, there were 43 NAEMT Agency Members.



NAEMT Annual Meeting

Members lit up Las Vegas in September during the NAEMT Annual Meeting. Held in conjunction with EMS World Expo, our members had opportunities to interact with peers, participate in top-notch education programs, and experience the progression of our association and profession. The Annual Meeting offered members the opportunity to learn about, and participate in, our association's most recent activities, meet association leaders to discuss issues impacting our profession, and network with professional colleagues from across the country and around the globe.



Known for its nightlife, the "city that never sleeps" also played host to non-stop programs each day. Meetings for NAEMT committees, education programs, the Affiliate Advisory Council, and the general membership were informative and productive. An NAEMT Faculty Meeting was held to update faculty in attendance on plans for updating our current education programs and new education courses in development. Association activities and successes during the year were presented to members, corporate partners were acknowledged for helping us reach those successes, and members were thanked for their attendance and support of the association.



National EMS Awards of Excellence

With the support of our corporate partners, NAEMT recognizes the outstanding achievements and contributions of select EMS professionals. We believe in honoring those who bring such positive representation to our profession. The following 2013 award recipients were honored at the NAEMT General Membership Meeting and Awards Presentation in Las Vegas, on September 9th.



Daniel Manz - NAEMT Rocco V. Morando Lifetime Achievement Award. Manz is Executive Director at Essex Rescue in Essex Junction, Vt., and is a certified EMS practitioner. This award is NAEMT's most prestigious award, and is named after a founding member of NAEMT.



Shawn Mease - NAEMT/Nasco Paramedic of the Year. Mease is a Paramedic with the Richmond Ambulance Authority in Richmond, Va.



Paul Schueth - NAEMT/Braun Industries EMT of the Year. Schueth is an Advanced EMT with Tripp County Ambulance in Winner, S.D.



Robert Ditch, EdD - NAEMT/Jones & Bartlett Learning Educator of the Year. Ditch is an educator at the Arizona Academy of Emergency Services in Mesa, Ariz.

Scholarships

NAEMT promotes the advancement of EMS personnel and is proud to offer scholarship opportunities to individual active members. In 2013, scholarships were provided to the following members to help advance their career:

First Responders (To EMT-Basic) – up to \$500 each

- Troy Lesmeister, River Falls, Wis.

EMT-Basic (To Paramedic) – up to \$5,000 each

- Jessica Colon, Bronx, N.Y.
- Ramon Deering-Estrada, Soquel, Calif.
- Gregory Johnson, Mason, Ohio
- George Manuel, Hilo, Hawaii

Paramedics (For advanced EMS education) – up to \$2,000 each

- Robert Steeps, Bixby, Okla.
- Scott Yates, Pawnee, Ill.

Degree completion program offered through The College Network – up to \$2,500 each

- Raymond Coffey, Orangeburg, N.Y.
- Marcella Hinzman, Salem, Ohio

Online Presence

To share important information with all in EMS, while building an online forum for interactive dialogue with members, NAEMT implemented a full social media outreach program. Through frequent postings of timely and relevant EMS materials, NAEMT gained more than 6,000 Facebook and 1,200 Twitter fans since the launch in September 2013. Several social media outlets are used to promote industry events and photos of NAEMT education courses held around the world, as well as updates on advocacy and other notable issues and trends in EMS.



EMS Fitness

In an effort to reduce injuries from patient movement, improve EMS practitioner health and create a safer work environment, NAEMT collaborated with the American Council on Exercise (ACE) last year to create recommended EMS fitness guidelines. The guidelines, contained in the document *Task Performance and Health Improvement Recommendations for Emergency Medical Service Practitioners*, were formally endorsed by NAEMT in January 2013.



To conduct the research upon which the recommended guidelines are based, ACE sent a team of exercise physiologists to five sites across the country that offered a variety of service delivery models, environments, populations served, geography, and a diversity of EMS practitioners. The physiologists observed EMS practitioners bending, twisting, reaching, pushing, pulling and maneuvering while providing patient care - repetitive motions often done in tight spaces. They also observed the external loads imposed by carrying or moving patients and equipment. The team used the site visits, ride-along encounters and staff interviews to generate initial observations and a practitioner task analysis. The results of the efforts were found to be consistent from site to site.

The recommended guidelines are designed to improve job-related physical capacity; improve overall wellness; and create self-reliance.



E.V.E.N.T.

The EMS Voluntary Event Notification Tool (E.V.E.N.T.) allows EMS practitioners to anonymously report near-miss, line of duty death, and patient safety incidents by answering a series of questions in an online format. The system collects

and aggregates data that is then analyzed and used in the development of EMS policies and procedures, and for use in training, educating and preventing similar events from occurring in the future.

This project is led by the Center for Leadership, Innovation, and Research in EMS (CLIR) with sponsorship provided by NAEMT, the North Central EMS Institute (NCEMSI), the National EMS Management Association (NEMSMA), the Paramedic Chiefs of Canada (PCC), and the National Association of State EMS Officials (NASEMSO). E.V.E.N.T. data helps “connect the dots” of practitioner and patient safety to spot potential trends in both safe and unsafe practices. In 2013, there were 21 near-miss incidents, 131 patient safety incidents, and 51 violence events reported.

EMS WEEK ideas

EMS Week

National EMS Week was celebrated May 19-26, 2013. EMS agencies and organizations across our country recognized the lifesaving service our EMS practitioners provide to their patients on a daily basis, and the important role of EMS in our nation’s preparedness strategy and response to disasters.

The 2013 EMS Week Ideas site (www.emsweekideas.org) was hosted by NAEMT and sponsored by Jones & Bartlett Learning. It provided tips and resources for celebrating EMS, planning your EMS career, being an advocate for EMS, connecting with your community, and featured a virtual library of EMS history and the heroes who have brought us so far. In short, it is a site to encourage participation and involvement of all in EMS and their communities.



2013 AFFILIATES AND PARTNERS

2013 Affiliate Advisory Council

NAEMT works collaboratively with other EMS associations to strengthen the EMS profession. Affiliation is a formal relationship between NAEMT and an EMS membership association to help further our shared purpose and goals. Affiliated associations are represented on NAEMT's Affiliate Advisory Council to advise the NAEMT Board of Directors on issues and concerns within EMS. The following EMS associations were affiliated with NAEMT in 2013.

Alabama EMT Association	National EMS Management Association
Arkansas EMT Association	Nebraska EMS Association
Delaware State Emergency Medical Services Association	New Hampshire Association of EMTs
EMS Association of Colorado	New Mexico EMT Association
The Florida Ambulance Association	New York State EMS Association
Florida EMS Association	New York State Volunteer Ambulance & Rescue Association, Inc.
Georgia Association of EMS, Inc.	North Central EMS Cooperative
Indiana EMS Association	North Dakota EMS Association
Iowa EMS Association	Oklahoma EMT Association
Japanese Paramedics Association	Oregon EMS Association
Kansas EMS Association	Pennsylvania Emergency Health Services Council
Kansas EMT Association	Professional Ambulance Association of Wisconsin
Louisiana Association of Nationally Registered EMTs	South Carolina EMS Association
Maryland EMS Program	South Dakota EMS Association
Michigan EMS Practitioners Association	Tennessee Ambulance Service Association
Mississippi EMT Association	Vermont Ambulance Association
Missouri EMS Association	Wisconsin EMS Association
National Collegiate EMS Foundation	Wyoming Association of EMS Advocates

Corporate Partners *as of December 31, 2013*

NAEMT's Corporate Partners are just that – our partners. They support our mission and programs that represent and serve EMS practitioners. Our long-term progress as an association can be linked to the growing confidence our partners have placed in NAEMT. On behalf of all of the members of NAEMT... thank you for your support!

PREMIER

EMS World
The College Network
Jones & Bartlett Learning
MedicAlert
Onsite OHS
Diamond:
EMS1.com
Presidential:
National Registry of Emergency
Medical Technicians
Ambulance Plus

PLATINUM

JEMS
Skedco

GOLD

OnStar
Braun
Emergency Training Associates

SILVER

5.11 Tactical
National EMS Management Association

BRONZE

American Red Cross
Coalition Against Bigger Trucks

ANNUAL

American Heart Association
CAE Healthcare
CentreLearn Solutions
Distance CME
EVS Ltd.
Frazer Ltd.
Gold Cross
Holland & Knight
Nasco
National EMS Museum
Page, Wolfberg & Wirth
Physio Control
Pro-Med Network

2013 LEADERSHIP AND STAFF

Elected members of the NAEMT Board of Directors commit their time and effort to lead the association and carry out its mission to represent and serve all EMS practitioners. Volunteer committee members dedicate themselves to raising the bar on NAEMT programs and projects. The leadership of NAEMT is undeniably the backbone of support for all association initiatives and representation. Without their generous contributions, this Annual Report would be far shorter. On behalf of the NAEMT membership, we greatly appreciate your dutiful commitment.

2013 NAEMT Board of Directors

President	Don Lundy
President-Elect	Chuck Kearns
Immediate Past President	Connie Meyer
Secretary	Jim Judge
Treasurer	Dennis Rowe
Region I Director	Jim Slattery
Region I Director	Scott Matin
Region II Director	Chad McIntyre
Region II Director	Rick Ellis
Region III Director	Chris Cebollero
Region III Director	Sue Jacobus
Region IV Director	Rod Barrett
Region IV Director	Bruce Evans
At-Large Director	Ben Chlapek
At-Large Director	Matt Zavadsky
Medical Director	Paul Hinchey

2013 NAEMT Staff

Executive Director	Pamela Lane
Assistant Executive Director	Lisa Lindsay
Industry Relations Manager	Melissa M. Trumbull
Communications Manager	Kathleen Taormina
Education Services Manager	Corine Curd
Assistant Business Manager	Keshia Robinson
Member Services Manager	Tammie W. Patterson
Communications & Technology Coordinator	Jessica Kreps
Education Services Representative	Sylvia McGowan
Education Services Representative	Jody Phillips



2013 NAEMT Committees

Advocacy	Jim Judge, <i>Chair</i>
Advanced Medical Life Support	Jeff Messerole, <i>Chair</i>
Candidacy and Elections	Dennis Wilham, <i>Chair</i>
MIH-CP	Matt Zavadsky, <i>Chair</i>
Education	Bob Loftus, <i>Chair</i>
EMS Code of Ethics	Connie Meyer, <i>Chair</i>
EMS Safety Program	Mike Szczygiel, <i>Chair</i>
Emergency Pediatric Care	Chris Cebollero, <i>Chair</i>
Field EMS Bill Steering	Bruce Evans, <i>Chair</i>
Finance	Dennis Rowe, <i>Chair</i>
Health and Safety	Jules Scadden, <i>Chair</i>
Leadership Development	Connie Meyer, <i>Chair</i>
Membership	Scott Matin, <i>Chair</i>
Military Relations	Ben Chlapek, <i>Chair</i>
Prehospital Trauma Life Support	Will Chapleau, <i>Chair</i>
Principles of Ethics and Personal Leadership Course	Scott Matin, <i>Chair</i>

Acknowledgement and gratitude: Glen Luedtke retired in 2013 as Chair of the NAEMT EMS Safety Committee, a position he held since the committee's inception in 2009.

FINANCIAL STATEMENTS

Statements of Financial Position

December 31, 2013 and 2012

ASSETS	2013	2012
Current Assets:		
Cash and Cash Equivalents	\$ 255,715	\$ 267,205
Accounts Receivable, Less Allowance for Uncollectible Amounts of \$6,000 in 2013 and 2012	215,017	186,543
Prepaid Expenses	17,968	20,926
Total Current Assets	\$ 488,700	\$ 474,674
Other Assets:		
Property, Furniture and Equipment, at Cost, Net	\$ 380,068	\$ 357,615
Investments	2,041,429	1,422,429
Utility Deposit	123	123
Total Other Assets	\$ 2,421,620	\$ 1,780,167
Total Assets	\$ 2,910,320	\$ 2,254,841
LIABILITIES AND NET ASSETS		
Current Liabilities:		
Accounts Payable	\$ 105,251	\$ 94,145
Accrued Liabilities	22,433	34,823
Unearned Membership Dues	107,389	133,916
Unearned Corporate Sponsorships	39,550	35,864
Tenant Deposits	1,900	1,900
Total Current Liabilities	\$ 276,523	\$ 300,648
Net Assets:		
Unrestricted:		
Designated	\$ 100,000	\$ 100,000
Undesignated	2,533,797	1,854,193
Total Net Assets	\$ 2,633,797	\$ 1,954,193
Total Liabilities and Net Assets	\$ 2,910,320	\$ 2,254,841

Statements Of Activities

For the Years Ended December 31, 2013 and 2012

	2013	2012
Support and Revenues:		
Educational Programs and Royalties	\$ 1,441,757	\$ 1,218,697
Membership Dues	313,561	262,543
Conferences	60,974	101,053
Corporate Sponsors	108,414	93,546
Donation	399,062	-
Miscellaneous	30,887	37,059
Total Support and Revenues	\$ 2,354,655	\$ 1,712,898
Expenses:		
Program Services:		
Educational Programs	\$ 131,778	\$ 248,389
Conferences	93,643	123,647
Publications	33,949	31,201
Awards	878	705
Contributions	134,088	5,554
Organizational Dues	20,600	43,100
Supporting Services:		
Administrative and General	981,844	903,683
Membership Maintenance and Promotion	444,065	321,197
Total Expenses	\$ 1,840,845	\$ 1,677,476
Change in Net Assets Before Investment Income	\$ 513,810	\$ 35,422
Investment Income	165,794	96,631
Change in Net Assets	\$ 679,604	\$ 132,053



Formed in 1975 and today more than 40,000 members strong, the National Association of Emergency Medical Technicians (NAEMT) is the only national association dedicated to representing the professional interests of all emergency medical services (EMS) practitioners, including Paramedics, advanced emergency medical technicians, emergency medical technicians, emergency medical responders and other professionals working in pre-hospital emergency medicine. NAEMT members work in all sectors of EMS, including government service agencies, fire departments, hospital-based ambulance services, private companies, industrial and special operations settings, and in the military.

National Association of Emergency Medical Technicians

www.naemt.org



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