

NAEMTNEWS

A quarterly publication of the National Association of Emergency Medical Technicians

EMS in Critical Condition: A National Survey on EMS Economics and Operations

The pandemic and EMS workforce shortage have forced EMS leaders to re-imagine their current economic and service delivery models without sacrificing patient care.

NAEMT recently conducted a survey to gather national data on how EMS agencies are now funding and operating their services compared to 2019 to better understand how agencies have responded to changes in available funding and workforce shortages.

The survey found that widespread difficulties recruiting and retaining paramedics and EMTs, and rising costs for everything from equipment and supplies to wages, are straining EMS finances.

The pressures have prompted many agencies to make changes to service delivery, namely: longer response times, alternative responses to low-acuity calls, and moving from dual paramedic to single paramedic units.

"Ongoing workforce shortages have driven agencies to make changes in deployment, crew configurations, and call response reprioritization to maximize workforce resources," said Matt Zavadsky, chair of the NAEMT EMS Economics Committee. "This is resulting in reductions in services to respond to the most pressing needs."

The survey received 450 responses from 47 U.S. states, two territories, and one Indian reservation. Respondents represented all types of delivery models, as well as a range of call volumes, demographic regions, and staffing models.

The findings will be shared with stakeholders, including Congress, state elected officials, and federal and state agencies, to help them understand the strain EMS agencies are under, and to provide data to help NAEMT in advocating for more resources. "This enables us to quantify the SEE PAGE 10

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Want to know more about urgent issues and innovations in EMS operations, education and clinical care?

Listen to NAEMT's new podcast series, NAEMT Radio. Host Rob Lawrence and guests will provide expert perspectives and lively discussions on hot topics in EMS.

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PREMIER







DIAMOND



PLATINUM











GOLD























BRONZE









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RECRUITING

To attract new recruits, Vermont creates new level of responder.

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MEMBER SPOTLIGHT

You could say Brian Stennett's interest in viruses is infectious. Learn why exposure prevention is his passion.



It's More Important Than Ever to Celebrate EMS Week

By Susan Bailey, MSEM, NRP

Over the last couple of years, the news media has covered the EMS

workforce shortage and the closure of EMS agencies serving small communities across the nation. The news has also covered instances of EMS practitioners being fired for poor judgement, and in a few instances, criminally charged in connection with their service to patients. For those of us in the EMS profession, these stories are very troubling and painful to read.

As we work to address problems in EMS, we must also be sure to celebrate our achievements and the tremendous value that we bring to our communities and patients. EMS Week is coming up soon (May 21-27, 2023). We need to celebrate all that is good in EMS. This year's theme is EMS: Where Emergency Care Begins. It speaks to our essential role in providing frontline medical care to patients in need.

As we work to address problems in EMS, we must also be sure to celebrate our achievements and the tremendous value that we bring to our communities and patients.

Fifty years ago, when EMS was just starting, the focus was on taking patients with traumatic injuries caused by vehicle crashes to the hospital as soon as possible.

Today, EMS practitioners provide a full spectrum of prehospital and out-of-hospital emergent, urgent and preventive care. Most recently, EMS has opened and operated COVID-19 testing and treatment sites, treated COVID-19 patients in their homes and provided flu vaccines. In addition to responding to emergency calls, we are collaborating with hospitals, hospices, urgent care centers, and behavioral health centers to navigate patients to appropriate care, facilitate telemedicine consultations, or treat patients at home.

EMS Week is a great opportunity to celebrate the work of EMS practitioners and the service that EMS provides to communities, advocate for and educate the public about our profession, and remember those from our profession that we have lost.

We must celebrate the remarkable expansion of the types of care that EMS practitioners now provide. EMS Week is a great opportunity to celebrate the work of EMS practitioners and the service that EMS provides to communities, advocate for and educate the public about our profession, and remember those from our profession that we have lost.

To help make EMS Week special for you and your colleagues, plan an activity with your co-workers. This could be a softball game, hanging out at a nearby lake, having a barbeque or crawfish boil (that's what we are doing here in

Louisiana) or getting together for lunch or dinner. Recognize those within your agency who have made an exceptionally good impact over the last year.

Or, incorporate advocacy into your celebrations. Plan an EMS Day at your state capitol. Have brochures ready to hand out and educate anyone who asks about our profession and our service to the community.

If you are a supervisor or employer, take time to meaningfully thank your employees for the job they are doing. Let each of your employees know that they are appreciated. And, go public with your appreciation. Post a public message of thanks and appreciation to your employees in your local paper and on your agency web site. Publicly recognize CPR saves or other life-saving rescues which occurred in the past year.

In Louisiana, we are always looking for a reason to have a party, and EMS Week provides a very good reason. With everything that EMS and the entire healthcare industry has gone through and continues to go through, it is my hope that each of you will take time to celebrate the profession and your contribution to the profession. To each and every one of you, HAPPY EMS WEEK. You deserve to celebrate and to be celebrated.



Please join us for the NAEMT Annual Meeting, Sept. 18-21, to be held in conjunction with EMS World Expo, in New Orleans.

NAEMT members are cordially invited to attend the meeting, where they can meet fellow members and NAEMT leadership, network with their EMS colleagues from around the world, and create lasting friendships. There is no cost to attend the annual meeting.

General Membership Meeting and Awards Presentation

Tuesday, Sept. 19 5:30 p.m. to 6:45 p.m.

NAEMT leaders will recap the year's activities, present future goals and recognize recipients of the National EMS Awards of Excellence.

NAEMT Member Reception

Tuesday, Sept. 19 6:45 p.m. to 8:30 p.m.

Immediately following the awards presentation, join us for refreshments and a chance to connect with EMS colleagues from across the country and around the world.

NAEMT Members Save \$125 on EMS World Expo Registration

To redeem, log in to the Member Portal at naemt.org, select "Access Your Benefits" and then "EMS World Expo" benefit.

Or go to emsworldexpo.com and click "Register." Enter your name and email, and click "New Registration." Then click the NAEMT logo. Log in using your NAEMT username and password and you will be redirected to the EMS World Expo registration page where your member discount will be applied for the three-day core program.

Need to renew your membership? Go to the Member Portal at naemt.org and click the "Renew or Upgrade" link. Forgot your member number? Contact NAEMT at membership@naemt.org or call (601) 924-7744.

Other Events

All NAEMT members are also welcome to attend these meetings:

- ✓ NAEMT Board of Directors Monday, Sept. 18 8 a.m. to 11 a.m.
- ✓ Latin American Education
 Committee
 Wednesday, Sept. 20

7:45 a.m. to 9:15 a.m.

- ✓ Regional European Education Committee Wednesday, Sept. 20
 - 7:45 a.m. to 9:15 a.m.
- ✓ Mideast Education Committee Wednesday, Sept. 20 11 a.m. to 12:30 p.m.

Additional NAEMT committee meetings will be held virtually in September and October. Look for times in upcoming emails and the *NAEMT Pulse*.

Other Annual Meeting events are by invitation only and include the Affiliate Advisory Council Meeting and Luncheon, the International Reception, the NAEMT Faculty Meeting and Reception, and the Lighthouse Leadership Graduation and Breakfast.



For a full schedule of events, visit naemt.org > Events > Annual Meeting.

NAEMT Launches New Podcast Series on Hot Topics in EMS

Want to know more about the hottest topics in EMS operations, education and clinical care? Even better, want to listen and learn while you're working out, doing chores or waiting around for your kid to finish practice?



Put in your earbuds and tune into NAEMT's new podcast series, NAEMT Radio. In 30-minute episodes to air twice a month,

host Rob Lawrence and guests will provide expert perspectives and lively discussions about our profession's most urgent and interesting issues.

The first episodes will cover:

- Highlights from recent national surveys on workforce engagement and what EMS practitioners want from their employers.
- Changes in EMS economics that are driving changes in staffing configurations and operations.
- A discussion on the key legislative initiatives our industry is focusing on in this congressional session.
- Cybersecurity in EMS.
- Clinical best practices and updates from top subject matter experts.

"We are thrilled to launch the NAEMT Radio podcast, to help listeners stay up to date and informed about the latest trends and most pressing issues in our profession," said NAEMT President Susan Bailey. "The podcast will also provide another avenue for NAEMT to share updates on the initiatives we're working on for NAEMT members."



With his experience and passion for EMS, Rob is the perfect host to engage our guests in conversations that will be insightful, eye-opening and definitely worth tuning in to.

Lawrence has served as operations chief for EMS agencies in the United Kingdom, Virginia and California. He began his career as a medical support officer in the British Army, and has trained military doctors, nurses and medics as an exchange officer with the Canadian military. He's a board member of the Academy of International Mobile Healthcare Integration (AIMHI), executive director of the California Ambulance Association, and is chair of the American Ambulance Association's State Association Committee.



Listen to Episode 1 of NAEMT Radio. https://naemtradio.podbean.com

Podcasts are also available on the NAEMT website. New episodes will be announced in NAEMT Pulse and on social media.

"With his experience and passion for EMS, Rob is the perfect host to engage our guests in conversations that will be insightful, eye-opening and definitely worth tuning in to," Bailey said. "We're excited to have him as the host of NAEMT Radio."

NAEMT Webinars: Free CE for NAEMT Members!

NAEMT webinars feature timely topics in EMS clinical care and operations, presented by leading experts in their fields.

NAEMT members earn free CE credit for attending the *live* webinars. Recorded webinars are available for viewing at any time in the NAEMT Member Portal at naemt.org. (CE credit is only offered for the live webinars).

Look for upcoming webinars in your email and NAEMT Pulse!

RECORDED EMS in Critical Condition: Analysis of National Survey on EMS Economics and Operations

In the most comprehensive survey of its kind, NAEMT asked EMS and fire agencies across the U.S. to reveal the critical challenges facing EMS systems in urban, suburban, rural and frontier communities. The webinar highlighted the major findings of the survey. Leaders in EMS operations and economics from a variety of demographics, along with representation from ICMA's Center for Public Safety Management, shared their challenges, how they are adapting, and what the future holds for EMS.



RECORDED Keys to Success: Coordinating an Effective Course

This webinar brings together NAEMT course coordinators from around the world to learn best practices from top faculty on creating a successful student and instructor experience. Topics covered will include navigating the NAEMT education portal, how to access materials and resources, developing a strong faculty team, addressing language and cultural barriers, classroom management, keeping instructors on track, and planning for the unexpected. All current and prospective course coordinators are encouraged to attend this webinar.



Advocacy Update

EMS Advocates Ask Congress to Help Fund Rural EMS, Protect Reimbursements

On March 30, EMS professionals from across the country arrived on Capitol Hill for a day of grassroots advocacy.

During the 2023 EMS On The Hill Day, EMS practitioners joined hundreds of their colleagues for face-to-face meetings with senators, representatives and congressional staff to discuss the critical issues facing EMS.

EMS participants asked members of Congress to support several important measures that will help EMS continue to provide a high level of service throughout our nation. EMS On The Hill Day legislative priorities included:

- Reauthorization of the SIREN grant program and increased funding
- **EMS Counts Act**
- Extending Medicare add-on payments for an additional three years
- Making the COVID-19 waivers permanent

NAEMT will continue to work to build support and pass this important legislation throughout 2023! To lend your support, please use our Online Legislative Service to send a quick email to your representative or senator and ask them to support our legislative priorities.

Visit naemt.org. Select "Advocacy" from the top bar, then "Online Legislative Service" in the pulldown.

\$20 Million in SIREN Funding in 2024

To help support strained rural EMS agencies, NAEMT is seeking \$20 million to fund the SIREN Grant Program in fiscal year 2024. The SIREN grants provide funding to hire, train, and equip EMS providers in rural areas.

Many rural EMS agencies struggle to find the resources they need to take care of patients across what are often large geographic areas, with long transport times and distances to hospitals. Often the only healthcare provider in their area, rural agencies are vital to the

communities they serve.

SIREN was funded at \$10.5 million in fiscal year 2023. EMS advocates asked Congress to reauthorize this grant program for another five years, and at a higher level.

Extending Medicare Add-Ons for 3 More Years

At the end of 2022, Congress authorized two additional years for the Medicare add-on payments that are essential to the financial stability of EMS agencies.

The add-ons provide for an additional 2% in Medicare reimbursements for ambulance services provided in urban areas, 3% in rural areas and 22.6% in super rural areas. Congress had extended the add-ons through December 31, 2024.

NAEMT, along with other national EMS and fire organizations, is asking for Congress to extend the add-ons for an additional three years, through 2027, when CMS will have completed its ambulance cost data analysis.

Making the CMS Waivers Permanent

During the COVID-19 pandemic in 2020, CMS issued several waivers for ambulance services that gave them more flexibility in treating and transporting patients and allowed reimbursements for the services provided. The waivers allowed:

- Reimbursements for transporting patients to alternative destinations other than an emergency department
- Treatment in lieu of transport
- EMS facilitation of telehealth services
- Community paramedicine support for hospital home health programs

NAEMT is working in collaboration with other national EMS and fire organizations to introduce legislation to make these four waivers permanent for a wider variety of health issues. The COVID-19 public health emergency is set to expire on May 11.

EMS Counts Act to Improve Labor Statistics

The EMS Counts Act would improve the accuracy of federal EMS labor

Welcome New Advocacy Coordinators!

NAEMT advocacy coordinators build and support NAEMT's advocacy efforts in their state. Welcome to our newly appointed advocacy coordinators, and thank you for your efforts on behalf of your EMS colleagues.

- Michael Loiz, Connecticut
- Galen Coulter-Ledbetter, Iowa
- Dave Johnston, Kansas
- Matt Tavares, Maine
- Lisa Valadie, Mississippi

Becoming an advocacy coordinator is a great way to get more involved with NAEMT. Advocacy coordinators communicate with the elected officials in their state about important issues impacting EMS, help NAEMT build a grassroots network of EMS advocates, and attend monthly virtual briefings.

We have several states with open advocacy coordinator positions. To learn more or apply, visit naemt. org > Advocacy > Advocacy Coordinators.

statistics by adding new occupational categories to the Department of Labor's job classification system.

Currently, federal employment surveys ask respondents to choose between "firefighter," "EMT" and "paramedic" job categories. But these classifications fail to reflect the dual firefighter-EMS roles that many in the fire service have.

The EMS Counts Act divides firefighter into four sub-categories: firefighter, firefighter-EMT, firefighter-paramedic, and firefighter-all other.

This would ensure that all those who provide EMS through fire departments are counted in national labor statistics. Accurate labor statistics are necessary for workforce planning and development needs, in preparing for response to large-scale natural disasters or other emergencies, and in helping EMS advocate for funding and resources.





Join Us for the 2023 World Trauma Symposium

Tuesday, Sept. 19 New Orleans (at EMS World Expo)

"

If you are an EMS or other healthcare professional or are a member of academia or an industry that educates, equips, or supports our nation's first responder heroes, then you should plan to attend this event.

Paul Vecchio, former Operations Sergeant 1st Special Forces Group (Airborne), U.S. Army, and Vice President of Strategic Initiatives, North American Rescue

Ready to learn from global experts in prehospital trauma care? Register for the World Trauma Symposium.

For over a decade, the World Trauma Symposium has provided world-class trauma education for EMS practitioners, presented by international experts from the civilian, military and tactical sectors. Get inspired by discussions on responses to mass casualty incidents, updates on the latest research findings, debates on best practices, and innovations from the battlefield that civilian responders need to know.

The event will be offered in-person and livestreamed. The symposium provides up to 8 hours of CAPCE-approved CE, CME or nursing CE.

challenges EMS agencies are facing," Zavadsky said.

Ultimately, the goal is to reverse the underfunding of EMS, for the benefit of the EMS workforce and our nation's communities. "Local and state governments must assure EMS delivery is funded at a level that assures community expectations for essential EMS service delivery."

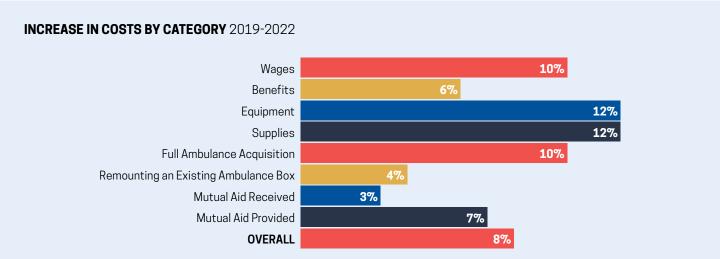
KEY FINDINGS

Costs have risen and are projected to continue to go up

Between 2019 and the end of 2022, respondents reported an average 8% net increase in overall costs. The greatest increase in costs was reported for supplies and equipment, with an average increase of 12%. Wage costs rose by 10% during that period, and respondents projected similar cost increases for the next three years.

- 85% of respondents reported higher costs for equipment and supplies.
- 93% reported higher wage costs.







Fee-for-service revenue up modestly

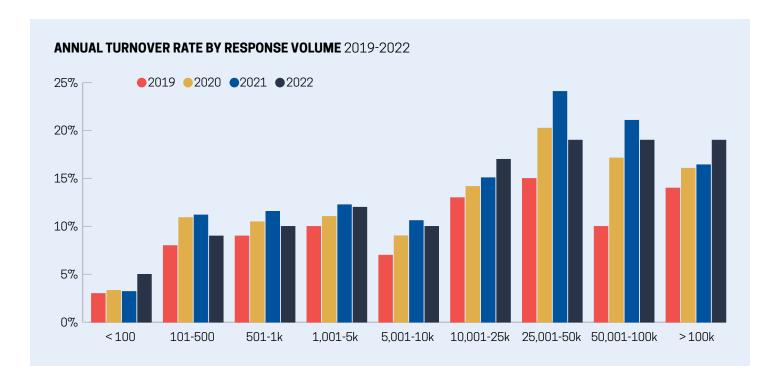
Respondents reported an average increase in fee-for-service revenue per transport of 5%, and an average increase in revenue generated from public sources of 9.4%. However, the increases aren't enough to cover rising costs.

Recruitment and retention remains difficult

Most agencies report experiencing increasing turnover rates, from 8% on average in 2019 to 11% in 2022 (although this has dipped a bit since it peaked in 2021.) Respondents also say they've seen a decrease in applications for paramedic/EMT positions, down on average 13% compared to 2019.

AVERAGE ANNUAL TURNOVER RATE FOR FIELD PRACTITIONERS 2019 TO PRESENT 12 10 10% 8 8% 6 4 2 0 2019 2020 2021 2022

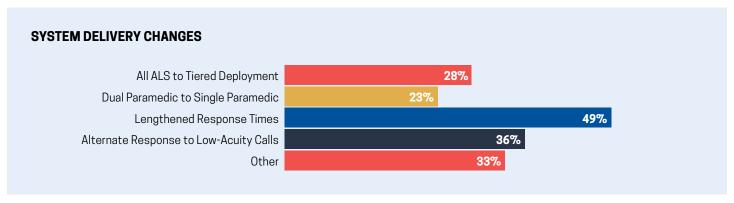
- 65% of respondents reported a decrease in applications for open positions.
- Turnover rates were higher at agencies with higher call volumes.

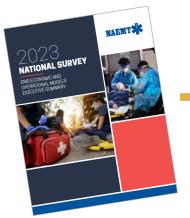


Agencies are adapting with system delivery changes

Nearly three-quarters (72%) of respondents reported making changes to system delivery, deployment, or staffing between 2019 and 2022.

- Of these agencies, nearly half (49%) reported lengthening response times.
- 36% reported implementing alternate response to low-acuity calls.
- 28% of respondents reported changing from an all ALS model to tiered deployment.
- 23% reported transitioning from dual paramedic to single paramedic deployment.





READ THE FULL REPORT,

"2023 National Survey on EMS Economic and Operational Models Executive Summary," at naemt.org.

To Attract New Recruits,Vermont Creates New Level of Responder

EMS agencies across the United States are facing severe workforce shortages. To fill the most urgent personnel needs and attract new recruits, Vermont has created a new category of entry-level responder: Vermont EMS First Responder, or VEFR.

VEFRs must have 16-20 hours of training in skills such as CPR, bleeding control and other first aid techniques, such as using epinephrine auto-injectors, naloxone and helping choking victims. They're also taught the basics of scene safety, triage and handling bloodborne pathogens. VEFRs can then become affiliated with an EMS agency, and receive a state certification. (Unlike Vermont's EMTs and paramedics, VEFRs do not need to pass the National Registry exam and they are not state licensed).

Alleviating shortages

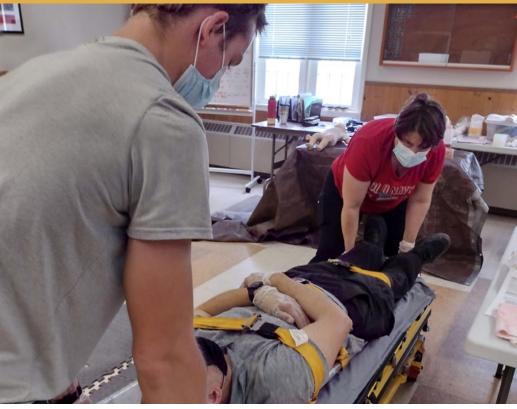
Since the first VEFR course was offered in 2021, VEFRs have helped to alleviate staffing shortages and keep ambulances on the road, agency leaders say.

VEFR training is also helping to bring new recruits into EMS agencies. Of about 500 people who have taken the VEFR course, over 300 are affiliated with an EMS agency and are state certified, says Bambi Dame, EMS training administrator at the Vermont Department of Health.

Of those, more than one in four (27 percent) have gone on to enroll in an EMT course – including 21 who are now licensed EMTs and two who are advanced EMTs. "The VEFR is a strong recruitment tool for people to explore opportunities within EMS," Dame said.

Another plus: in a state with lots of rural areas and volunteer services, the VEFR program puts more people out in the community who are trained to help in the most urgent emergency situations.

VEFRs in one rural community were recently credited with a successful



Bennington Rescue Squad teaching the Vermont EMS First Responders (VEFR) course.

cardiac arrest resuscitation. They were nearby when the man collapsed, and initiated compressions while waiting for the ambulance.

It's getting more people out in the community who can do CPR, and stop bleeding, or recognize when someone is having a stroke and they know who to call.

"We don't want to replace EMR, EMT or AEMT licensures. We rolled this out in a way to help the community," Dame said. "It's getting more people out in the community who can do CPR, and stop bleeding, or recognize when someone is having a stroke and they know who to call."

Keeping ambulances in service

The idea for VEFRs emerged from discussions between the Vermont EMS Advisory Committee, state regulators, and other stakeholders. In surveys and conversations with EMS agency leaders, staffing shortages came up again and again, says Drew Hazelton, chair of the Vermont EMS Advisory Committee and chief of Rescue Inc. in Brattleboro, Vermont.

"One of the many challenges we identified was the declining number of people entering EMS," Hazelton said.

They wondered if the length of time and cost to take an EMT course was a deterrent, and wanted to come up with an alternative. "One of the conversations we had was about whether what we are asking people to do to enter the profession was reasonable," he said. "If you've never done it before, how do you

know if that is something you want to do? What is the right size ask?"

The advisory committee worked with the state health department to determine which critical skills VEFRs needed, and developed a curriculum that would "allow new people in EMS to get a start."

Changes to state law

In February 2022, the Vermont state legislature approved changes to its EMS rules establishing VEFR as a new level of responder. VEFRs who are affiliated with an EMS agency can respond within their service area, and receive state certification. Instead of requiring two licensed crew members, the revised law permits crews to include one licensed provider and one certified provider, which allows VEFRs to partner with a licensed EMT or paramedic on calls.

Whereas EMTs must be at least 18 years old, VEFRs can be 16 or older. VEFR certification is good for two years. To renew it, the state requires first responders to have an American Heart Association Heartsaver First Aid CPR AED certification or the equivalent, and four hours of continuing education.

Hazelton has taught the VEFR course four times, to groups of students ranging in age from their teens to 60s. "It's been really successful," he said. "Our last class was filled, and we already have people waiting for the next program to start."

VEFRs are taking some pressure off responders in the state's rural areas.



Hazelton knows of one community of about 700 residents that was down to two EMTs. They were doing their best to respond to emergencies, but they were exhausted, he says.

"With the VEFR program, we now have eight responders in town. This is bringing down the stress levels for providers. They feel they can leave town if they need to, and that they have more support on scene," he said.

Sparking an interest in EMS

Bennington Rescue Squad is among the EMS agencies that have embraced VEFRs to help meet urgent staffing needs and to recruit for their EMT apprenticeship program.

"Whether it's EMTs or paramedics, there just doesn't seem to be enough anymore," said Bill Camarda, Bennington's interim executive director.

> Whether it's EMTs or paramedics, there just doesn't seem to be enough anymore.

Although only 16-20 hours of training is required, EMS agencies that teach the course can offer more. Bennington's VEFR course is about 40 hours, including about 30 hours of online education that includes FEMA courses on incident command and hazardous materials, SALT mass casualty triage, and mandated reporter training for suspected child endangerment. The online education is followed by a day of hands-on skills practice.

Bennington offered the first VEFR course in January 2022, and has since held it five times, graduating 25 students ranging in age from 16 to 75. The cost to students is \$75, but even that's waived if they accept a job with Bennington.

Bennington tries to limit how often VEFRs staff ambulances, typically bringing them in for just one or two shifts a week and when the alternative is placing the ambulance out of service, he says. Crews benefit from the support of a partner who has more training and experience,



so he wants to minimize how often they are paired with someone who is brand new to EMS. Sometimes VEFRs ride as a third member of a crew.

"Our folks are already burned out from a few years of COVID, and we really would like to keep them able to share the workload with their partner," including patient care and documentation, Camarda said.

But the program is working. Several VEFRs have joined Bennington's EMT Apprentice Program. That program is registered with the Vermont Department of Labor, and enables students to earn over \$17 an hour while they complete their EMT education. After graduating, they are offered full-time jobs with benefits at the agency.

For workforce development, Bennington also offers paid, in-house training for EMTs to become advanced EMTs, and an education benefit to EMTs and AEMTs studying to become paramedics at local community colleges.

"This program gives VEFRs the opportunity to gain some experience, ride with ambulance crews and determine if they are ready to take those next steps, while also helping us to fill some gaps in the workforce in the interim," Camarda said.

How Can EMS Agencies Improve Job Satisfaction and Retention? Advice from Paramedics and EMTs

NAEMT recently conducted a survey of field EMS practitioners nationwide about various aspects of their jobs, including pay, their feelings of job satisfaction and engagement, and if they had plans to leave the profession. The results of the survey painted a picture of an EMS workforce that remains steadfast in caring for patients and serving the community, but is under a high degree of strain.

The survey asked field practitioners how EMS agencies could improve job satisfaction and increase retention.

Nearly 1,200 provided suggestions, which were grouped into several major themes.

Here's what they told us.

EMS practitioners want improved pay and benefits.

Respondents want an increase in wages so they are not compelled to get a second or third job to pay their bills. In addition, they want pay that's more on par with other public safety workers.

Some asked for specific benefits. such as a meal stipend while on shift, agency-provided uniforms, or for required continuing education courses to be provided to them. Other suggested incentive programs to reward employees for longevity.

EMS needs to become an essential service like police and firefighters.
Our jobs are just as important and we should have the same pay and benefits.

Pay that is equivalent to other public safety in the area, properly resourced with enough trucks to meet the call demand, and improved safety for providers.



Higher wages. More than \$11 an hour for EMTs and more than \$20 an hour top out for medics.

Pay people enough so they can work where they live without having to pick up a second job just to live. If people make enough to survive they would not be out looking for something with better pay.

So many are burned out after 1 to 3 years. I could at least deal with more if I was paid appropriately.

They want employers to support a healthy work-life balance.

Respondents often linked low pay with the need to work multiple jobs that interfere with their ability to have a healthy, sustainable work-life balance.

Making \$42,000 a year without OT is not a survivable wage. I have to choose whether I can see my kids or feed them. Pay enough money to not have to work multiple jobs is all we can ask for.

Tired of having to work 2 full-time jobs in order to support myself and my family due to terrible pay/benefits.

EMS practitioners especially dislike mandatory overtime and holdovers.

Workforce shortages have prompted some EMS agencies to require paramedics and EMTs to work overtime. Working long hours without sufficient time off can lead to negative mental, physical and social effects, including stress, exhaustion and low morale. Studies have even linked working 55 hours or week or more with higher rates of stroke and heart disease.

We get treated like we're replaceable when I know we're not. I have 200-plus hours of PTO. I request time off and I get told no even though I've worked two years without a vacation.



READ THE FULL REPORT, the 2022 National Survey on EMS Workforce Engagement and Satisfaction, at naemt.org. NAEMT has previously sent the full report to NAEMT members, to the leaders of all U.S. EMS and fire organizations, federal partners and congressional offices.

Less forced mandatory shifts due to low staffing levels. People are overworked and tired. It's unsafe.

Stop overworking your employees. The job is hard enough without 20 to 40 hours of OT a week.

And they don't feel like they are treated with enough respect.

Numerous respondents commented that they felt they weren't treated with respect from their employers or other healthcare providers they interact with, and that EMS agency leaders should do more to listen and act on their input.

Respect employees more and value their opinions.

More respect from managers and others EMS interacts with, such as nurses and hospital staff.

Listen to your senior practitioners. We have been in the field for a very long time and offer some of the best advice.

EMS practitioners want to be recognized for a job well done.

Respondents commented that their employers are too quick to point out mistakes, yet often fail to offer praise for good performance.

Acknowledge your employees. Make them feel appreciated and not like they are just a number. Let them know their hard work and dedication does not go unnoticed. The pandemic along with the EMS shortage is taking a toll on us mentally and physically...I have watched EMS practitioners who had so much dedication and always kept a positive attitude slowly dwindle down to not caring with a negative attitude. A little appreciation would go a long way.

Learn to recognize your employees. You only hear from management when it's bad news.

Positive feedback goes a long way to making your employees feel valued. If you're always going to call us out when we do something wrong, let us know when we do something right too.

But recognition is not a substitute for better wages.

Some paramedics and EMTs acknowledged that their employers were attempting to improve retention through employee recognition programs. But they seem jaded about EMS agency efforts to show appreciation that don't involve increasing wages.

You know the answer. But they won't. They would rather throw us pizza parties and give us T-shirts rather than give us better pay.

My employer has tried so, so many things to increase retention but poor retention and satisfaction are still pretty prevalent. Paying more is the only thing that they're still trying to ignore as a solution.

I don't think that \$13.50 an hour is enough to feed my family, and with the cost of living rising through the roof and gas prices sitting at \$4.30 per gallon as of writing this...Everybody knows the solution but no one wants to do anything about it. If pay doesn't go up, we're going to lose a lot more people.

Basically I'm leaving because I know we don't matter. For EMS Week, they got us cheap lunch boxes with Dollar Store snacks and gave us the water bottles that have been sitting at HQ for about a year.

To improve satisfaction, EMS practitioners say management particularly communications needs to be improved.

Numerous respondents expressed a lack of leadership within their agency as contributing to poor job satisfaction and engagement.

Communication between management and street level needs to be consistent and more open. Management doesn't necessarily need to have all the answers/ solutions to questions/problems.

Sometimes it's enough to acknowledge there is an issue and what the potential next steps might be.

Back your people. Stop being bosses and become leaders.

Better communication and respect for providers. Better pay. Listen to crews and apply feedback to improve crew and management relations.

Listen to your employees, they're the ones out in the field. Help them out in the field instead of sitting behind a desk.

Listen to all staff, value us as individuals, follow your own rules.

EMS practitioners also want more training and education opportunities.

Numerous respondents expressed a desire for enhanced training and education opportunities, to help fulfill requirements to maintain certification and to enrich their knowledge to become better responders. Some also mentioned a need for more mentors.

Incentivize training and professional development more. Initiate more handson EMS and fire training. Establish an accredited training program.

Provide more training, with college credit, better pay for those with more training, and the equipment to utilize the training (ventilator, point-of-service ultrasound, point-of-care labs).

Implement a career ladder and provide more opportunities for training in the EMS side of the profession, just as much as the fire training.

More education and professional development opportunities.

Make training and education opportunities and CE courses available at no cost.

There's No Comparison.

EPC is THE BEST Education for Prehospital Pediatric Care.



The NAEMT Emergency Pediatric Care (EPC) 4th **edition course** focuses on critical pediatric physiology, illnesses, injuries, and interventions to aid EMS practitioners in providing evidence-based care to our youngest patients. Skills and patient simulations in the course support didactic content to ensure competency. The NAEMT EPC Course:

- Provides essential pediatric continuing education for all EMS practitioners, including:
 - EMTs, advanced EMTs, paramedics, nurses, physician assistants, and physicians.

- Meets the requirements of the National Registry's National Continued Competency Program (NCCP) for recertification.
- Promotes critical thinking, the foundation to providing quality care and formulating a differential diagnosis of the pediatric patient.
- Includes the Pediatric Assessment Triangle (PAT) as a tool to obtain a first impression in the pediatric assessment.
- Emphasizes the importance of family-centered care.

EPC - PALS Comparison

Curriculum	EPC	PALS	Cı
Didactic Topics			Pa
Pediatric Growth, Development,			Cá
and Assessment			Re
Respiratory emergencies	•	•	Ве
Trauma			Hy
Pediatric perfusion/shock	•	•	Bl
Medical Emergencies			Se
Cardiac Events: Resuscitation,		_	Fe
and Dysrhythmias			Sh
Toxicological Emergencies			Cł
Pediatric Maltreatment			М
Obstetric, Newborn Care, and			Вι
Congenital Defects			0
Children with Special			A
Healthcare Needs Mental Health			D
Skills Practice			W
			0
BLS Airway			Re
Intubation			0
Medication Administration			Hy
IV/IO Access			
Needle Decompression			
Cardiac: Asystole/PEA			
Cardiac: Pulseless VT/VF			
Cardiac: SVT			1
Cardiac: Bradycardia	-		

Curriculum Patient Simulations	EPC	PALS
Cardiac Events	• • • • •	•
Medical Emergencies Burns Other Trauma Additional Course Components Developmental Milestone Cards	• •	
Developmental Milestone Cards Written Evaluation (MC test) Other Course Formats: Refresher Online continuing education Hybrid (online component + classroom for skills and simulations)	•	•



www.naemt.org

In Memoriam Rocco V. Morando



Rocco Morando was a visionary who helped create the profession of EMS as we know it today.

NAEMT and the EMS community mourn the passing of Rocco V. Morando, one of the founders of NAEMT and first executive director of the National Registry of Emergency Medical Technicians (NREMT). Morando, 95, died on Feb. 21, surrounded by family.

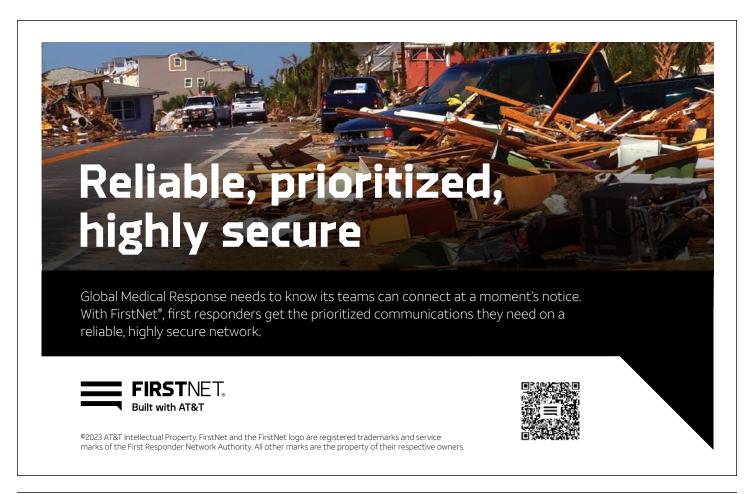
"Rocco Morando was a visionary who helped create the profession of EMS as we know it today," said NAEMT President Susan Bailey. "He saw early on the need for a national professional organization to work on behalf of the EMS workforce, and to help the profession evolve and grow."

In 1975, Morando brought together representatives from all of the known state EMS associations to a meeting in Chicago, where they discussed the need for uniform training and certification standards, a career ladder in EMS, and a

national professional association. That led to the formal establishment of NAEMT.

He saw early on the need for a national professional organization to work on behalf of the EMS workforce, and to help the profession evolve and grow.

The Rocco V. Morando Lifetime
Achievement Award, named in his honor,
recognizes a lifetime of commitment,
contributions and leadership to EMS.
The award is presented annually by NAEMT
and sponsored by the National Registry.





The National EMS Awards of Excellence celebrate our EMS colleagues who have made significant contributions to our profession, or who have gone above and beyond in serving our patients and communities.

Each year, we are honored to recognize them and their extraordinary accomplishments.

Nominations are now being accepted for the 2023 awards. Please nominate your exceptional colleagues, so that the EMS community can come together to recognize their dedication and thank them for their service.

2023 awards include:

- NAEMT/Velico Paramedic of the Year
- NAEMT/Demers-Braun-Crestline-Medix EMT of the Year
- NAEMT/Jones & Bartlett Learning Public Safety Group EMS Educator of the Year
- NAEMT/North American Rescue Military Medic of the Year
- NAEMT/Bound Tree-Sarnova EMS Medical Director of the Year
- NAEMT-AAP/Handtevy Pediatric Emergency Standards Pediatric EMS Award
- Dick Ferneau Career EMS Service of the Year
- Digitech Volunteer EMS Service of the Year
- Dynarex EMS Caring Award
- NAEMT-ACEP/Technimount EMS Safety in EMS Award
- FirstNet, Built with AT&T Wellness and Resilience Award

Nominations accepted through May 22.

Winners receive \$1,000, plus three core program registrations and a \$1,200 stipend for travel and lodging at EMS World Expo, to be held Sept. 18-22 in New Orleans, Louisiana.

Awards will be presented at the NAEMT General Membership Meeting or the EMS World Expo opening session. Recipients will be recognized in NAEMT and EMS World media.

























Submit a nomination at naemt.org > Initiatives > National EMS Awards.

National EMS Week 2023

May 21 to 27 is National EMS Week, when the nation comes together to thank EMS practitioners for their dedication and service.

To encourage the celebration of EMS Week, NAEMT partners with the American College of Emergency Physicians (ACEP) to recognize EMS practitioners and raise public awareness about the critical role of EMS. This year's theme is "EMS: Where Emergency Care Begins."

"On EMS Week, it's so important to honor the paramedics, EMTs and others in EMS who do so much for their communities," said NAEMT President Susan Bailey. "Where Emergency Care Begins' reminds the public of EMS's most important mission – the ability to respond appropriately to the most urgent emergencies, and to provide critical interventions in the field that save lives and reduce long-term disability."

Those critical incidents include trauma, heart attacks, sudden cardiac arrest, stroke, anaphylaxis, severe asthma attacks and traumatic brain injury (TBI). During the COVID-19 pandemic, EMS practitioners extended emergency care into homes, by providing care for those who were sick and relieving the pressure on overloaded hospitals.

"EMS practitioners demonstrate their commitment to their patients countless times every day, often in difficult circumstances – whether it's providing care on the side of a highway, carrying a patient down multiple flights of stairs or across treacherous terrain, or being in situations where their own safety isn't guaranteed," Bailey said. "EMS Week is an opportunity for both EMS agency leaders and communities to show our genuine appreciation, and let them know that our communities value them."

NAEMT EMS Week Raffle!

To celebrate EMS Week, NAEMT will raffle off a variety of must-have products. Items will include Amazon gift cards, 3M Littmann CORE Digital stethoscopes, 5.11 Tactical gear, and NAEMT merchandise!

Best of all, you don't have to do anything to enter – except be a full member! We randomly select membership numbers and notify winners via email.



EMS Week 2023 features six theme days. You may want to plan activities around each theme.

Sunday – Health, Wellness and Resilience Day Monday – EMS Education Day Tuesday – Safety Tuesday

Wednesday - EMS for Children Day

Thursday - Save-A-Life Day (CPR & Stop the Bleed)

Friday - EMS Recognition Day

Looking for ideas on how to celebrate? Visit naemt.org/initiatives/ems-week.

Find EMS Week logos, social media graphics, an EMS Week proclamation and other helpful materials for download at emsweek.org.

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NAEMT Active and Associate members **Save 15%** on Recert through the Member Portal at www.naemt.org.

MEMBER SPOTLIGHT Brian Stennett

Firefighter-Paramedic Palatine, Illinois

You could say Brian Stennett's interest in viruses is infectious.

A firefighter-paramedic for the Village of Palatine Fire Department, Stennett was the only one who raised his hand to be his department's infection control officer when the position opened up 16 years ago.

Some might see being the go-to guy for pathogen exposure prevention and notifications as a chore. But Stennett thought that protecting his colleagues could not be more worthwhile.

He took on the role, and eager to learn more, he went on to earn his Master of Public Health (MPH) in epidemiology from University of Illinois at Springfield. That led to additional opportunities: he became emergency preparedness manager for Northwest Community Healthcare, which operates a 500-bed hospital and multiple surgical centers and outpatient clinics.

He's also board president for the National Association for Public Safety Infection Control Officers (NAPSICO), teaches a course on highly infectious diseases for the FEMA Center for Domestic Preparedness in Alabama, and is vice chair of the NAEMT EMS Disaster Preparedness Committee.

Stennett, whose fire department covers 14 square miles north of Chicago and runs about 9,000 calls a year, talked with NAEMT News about what's on the horizon with new pathogens, and why infection control is something that every EMS agency needs to pay more attention to.



First, how did you get involved in EMS?

My dad was a firefighter-paramedic. I grew up going to the firehouse and doing ride-alongs with him. I took an evening EMT class my last semester in high school, and worked for the Stadium Rescue Squad while I was at Purdue University. I really loved EMS and the fire service, and I became a paramedic at 20.

What's a designated infection control officer (DICO), and how did you end up with that job?

The Ryan White law requires every fire, EMS and police agency to have a designated infection control officer for

handling notification of exposures to communicable diseases.

EMS agencies have other requirements they need to follow as well: The Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Standard requires workplaces where there is the potential for exposure to have a written policy on managing that, and to have somebody knowledgeable and educated on infection control and bloodborne pathogens to oversee your prevention program.

NFPA Standard 1581 also sets minimum requirements for fire department infection control programs.

Years ago, at Palatine, the infection control officer role sort of got passed along. It was hard to find somebody willing to take it. But it happened to be an area I was really interested in.

Do you think any infection control best practices that have emerged from the pandemic are here to stay?

There are certain sentinel events that have occurred over the last 100 years with infectious diseases. One was the development of penicillin and antibiotics, which changed how we treated bacterial infections.

In the 70s, when my dad was a paramedic, it was a badge of honor to get blood up to your elbows during a trauma call. Then HIV happened. Now we have to wear gloves on every call and it became part of your standard precautions.

With the pandemic, source control is the thing I am most interested in seeing if that becomes a permanent change. Some are wondering, 'When can we go back to normal and stop wearing masks all the time?' Well maybe this is like the shift with HIV and wearing a mask with most patient encounters will become the new standard. The pandemic may be one of those sentinel events impacting how PPE is used and viewed within healthcare.

When you took over as infection control officer, did you make any changes at your agency?

We changed the way the process works with hospitals for when an exposure occurs. Previously, if one of my paramedics got a needle stick on an ambulance call, they would tell the charge nurse, who would then check them in, draw their blood, do a workup and the employer would get billed workers compensation, even when 99 percent of the time the source patient didn't have HIV or hepatitis. This led to overtime expenses, medical expenses, and anxiety for the paramedic who was exposed, because it took four or five days to get results.

OSHA and the CDC said there should be rapid testing available, but it wasn't being used. We made sure to implement that, so paramedics would have an answer within a couple of hours.

We also instituted deep cleaning of our ambulances. We obviously have routine cleaning after every patient call. But we added a monthly deep clean, so that every nook and cranny of that ambulance is getting disinfected on a regular basis. That cuts down on the chances of there being MRSA on any surfaces.

I also upped the amount of detail in my annual bloodborne pathogen training. OSHA requires us to train on hepatitis B and HIV. But those aren't the only pathogens that we worry about. I also talk about what we have going on in our community that might pose a risk, such as what our flu season looks like, and norovirus or tuberculosis outbreaks. We saw lots of RSV (respiratory syncytial virus) this season.

Over the last three years, 30 million kids missed their childhood vaccine doses. That puts us at risk of being exposed to more measles and mumps. Less vaccination in a community means increased risk of coming across a patient with that. We need to be aware of how to recognize that.

Any viruses out there you're keeping an eye on?

The Nipah virus in Asia is carried by bats. There have been outbreaks in Bangladesh over the last 20 years. It has a fatality rate of 70%. Right now, it doesn't spread that easily among people, but has the potential for mutating and becoming a pandemic.

Egg prices are also skyrocketing, because we have had to cull millions of chickens because of an avian influenza. It's not a direct threat to humans yet, but the possibility exists for it to mutate and spread through human-to-human contact.

How do you combat "infection control fatigue" in EMS?

There's fatigue not just in EMS, but healthcare in general. It's complacency. You can roll the dice with pathogens 1,000 times and never get burned, which



can start a pattern of having deviations in practices where you start to cut corners and you get away with it. It's called the "normalization of deviance", a phrase that was coined by a sociologist in an analysis of the Challenger shuttle disaster. They knew there was a design flaw with the O-rings, and they accepted it, and it led to the space shuttle exploding. How did we get to that?

It comes from taking shortcuts. You get away with something so many times until you can't even remember what the original procedure was. We know we are supposed to clean the equipment a certain way, or wear PPE a certain way, but we don't, and nothing bad happens, and then that becomes your normal practice.

That is the role of the infection control officer, to step in and correct it so we are being proactive instead of reactive. Infectious disease exposure is a low frequency incident, but it's high risk and it can be life-changing.

You're board president for the National Association for Public Safety Infection Control Officers (NAPSICO). What does that organization do?

We developed a board certification called the DICO-C, through the International Board of Specialty Certification (IBSC). It's an online program to become certified as a designated infection control officer. NAPSICO also publishes a study guide to prep for the DICO-C exam.

You're a longtime NAEMT member. What prompted you to get involved?

Early on, I liked what NAEMT represented. I like the advocacy at the national level for legislation that represents our interests and protects EMS practitioners. There are not a lot of other organizations that do that for all of EMS.

You're NAEMT's representative and a member of the advisory committee to the National Emerging Special Pathogens Training and Education Center (NETEC). Can you tell us about that?

NETEC is developing the National Special Pathogens System of Care. Similar to the different levels of trauma centers, special pathogen treatment centers are a tiered system to handle these crazy pathogens that are out there.

There are about 10 Regional Emerging Special Pathogen Treatment Centers, which is the highest level. We're looking at how we can have these centers train other hospitals at lower levels to make sure they are ready to handle these patients when they walk through the front door.

From an EMS standpoint, it's how do we handle moving and transporting a patient with Ebola or another high-risk illness from one hospital to another, especially if they are far apart?

We've had multiple discussions on a strategy for isolating, treating and coordinating transfer of these patients to a higher level of care, and how to make that process run smoothly. My role as an advisor is to incorporate how EMS would be involved with that and the logistics of doing that.

What are some of the challenges in transporting patients with highly infectious diseases?

Let's say you have a long transport time and a patient with a pathogen that requires the highest level of PPE.

What if we are driving and there is a breach of PPE? How do you exit the ambulance, doff PPE and decontaminate on the side of the road? Do you have to have a second ambulance following? What if you need a bathroom break? What is the maximum distance that the vehicle can travel without needing fuel? You can't pull up at a gas station with an Ebola patient in the back.

There are also PPE questions. What is the maximum amount of time an EMS practitioner can be in PPE? Maximum level PPE elevates body temperature and can be physically taxing. We try to put limits on how long people are wearing PPE. This has to be taken into consideration. When you are fatigued, that's when mistakes happen. When you are dealing with the highest risk pathogens, that is the last thing you want to have happen.

As an advisor, it was a good opportunity to make sure the high stakes this represents for EMS was represented in that group.





What do you do outside of work?

I've done the Chicago triathlon eight times. I just got remarried, and we have four girls between us, and a baby boy due in April.

Congratulations Brian!

COME SEE US

Need to renew your membership? Want more information on NAEMT courses or benefits? Please stop by our booth. We love getting to meet our NAEMT members in-person!

APR 26-29	FDIC Indianapolis, IN
MAY 15-19	Special Operations Medical Association Scientific Assembly (SOMSA) Raleigh, NC
MAY 31-JUN 4	Accreditcon Louisville, KY
SEPT 18-22	EMS World Expo New Orleans, LA
OCT 19-22	Vital Signs Syracuse, NY
NOV 2-5	Colorado EMS Conference Keystone, CO

Avrey Wilson, EMT, Receives NAEMT-CSU Scholarship



NAEMT congratulates Avrey Wilson of Miami, the recipient of the 2022 NAEMT-Columbia Southern University (CSU) scholarship. The CSU scholarship is offered exclusively to NAEMT active members. Wilson plans to use the scholarship to pursue a bachelor's degree in healthcare administration.

NAEMT and CSU partner to offer an

annual scholarship that covers up to 60 credit hours towards one online degree program for an NAEMT member. The scholarship is applied directly to the recipient's tuition for up to three years or until the completion of the selected online degree program, whichever comes first.

Applications are accepted between July 30 and Oct. 31. Log into the member portal at naemt.org for details or to apply.



Tammie Patterson congratulates NAEMT Member John Guzek on his raffle wir

Welcome New Agency Members

NAEMT warmly welcomes our newest agencies members to the NAEMT family. We look forward to representing and serving you:

- Cedar Hill Fire Department, Cedar Hill, TX
- Cottage Grove Fire Department, Cottage Grove, MN
- New Madrid County Ambulance District, New Madrid, MO
- Susquehanna Regional EMS, Williamsport, PA
- Wayne Township Fire Department, Indianapolis, IN

NAEMT was recently at the Wisconsin EMS Association (WEMSA) conference in Green Bay. It was great seeing so many of our Wisconsin NAEMT members!





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IMPORTANT INFORMATION: The U.S. Department of Education recently announced a student loan debt relief plan which includes forgiveness of up to \$10,000 for qualifying federal student loans and up to \$20,000 for qualifying Pell Grant recipients. For more information, please visit www.studentaid.gov/debt-relief-announcement. Please note that if you refinance qualifying federal student loans with Laurel Road, you may no longer be eligible for certain benefits or programs and waive your right to future benefits or programs offered on those loans. Please carefully consider your options when refinancing federal student loans and consult www.studentaid.gov for the most current information.

1. A \$300 cash bonus offered on new student loan refinance applications from active NAEMT members. The loan application must close in order to qualify for the bonus which will be paid within 45 days of closing. Existing Laurel Road members are not eligible. This offer cannot be combined with any other discounts from Laurel Road affiliated partners or employers nor the Student Loan Refer-a-Friend Program.

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