EMS MEMORIAL BIKE RIDE PAGE 28

SUMMER 2023

NAEMT NEWS

A quarterly publication of the National Association of Emergency Medical Technicians

How to Create a **Culture of Workforce Engagement in EMS**

Turnover at EMS agencies has been relentless over the past few years. The loss of so many EMS practitioners has contributed to workforce shortages that have led to cuts in services, added stress and strain on those who remain on the job, and even agency closures.

To boost retention, EMS agency leaders, and those who aspire to be, need to ask whether they are doing enough to establish a culture of workforce engagement.

What's engagement?

Employee engagement is the level of commitment, loyalty and connection an employee feels toward their organization. Research has shown that engaged employees are more likely to stay with their employer. They also perform better on multiple performance outcomes, such as lower absenteeism and fewer patient safety incidents.

Yet employee engagement is difficult to achieve in EMS, and across other industries. A Gallup survey of U.S. workers found that just 32% of American workers are engaged in their jobs, while 52% say they're "just showing up" and 17% are "actively disengaged."

In 2022, NAEMT surveyed EMS practitioners to get a sense for how engaged and satisfied they were with their jobs. The survey found that most felt engaged with certain aspects of their work, such as providing patient care.

But other aspects of the job caused so much stress and unhappiness that people were looking for the exit. Sources of dissatisfaction included work-life balance, pay, mental and physical health concerns, lack of professional development opportunities, and poor leadership and communication from agency leaders.

SEE PAGE 10

How Allina Health EMS Supports a Culture of Engagement and Resilience

SEE PAGE 11

PRESTIGE

FIRSTNET Built with AT&T

ELITE

EMSWORLD PRINT ONLINE EXPO

PREMIER

COLUMBIA SOUTHERN UNIVERSITY

PUBLIC CONSULTING GROUP

DIAMOND

MEDLINE EMS EMERGENCY MEDICAL SERVICES

ZOLL

PLATINUM

amazon business Reshape buying

laurel road

PUBLIC SAFETY GROUP A DIVISION OF JONES & BARTLETT LEARNING

REV Ambulance Group

stryker

Journal of Special Operations Medicine

GOLD

DEMERS

BRAUN

CRESTLINE

MEDIX

SILVER

icp | Aladtec

American College of Emergency Physicians ADVANCING EMERGENCY CARE

NinthBrain

npp gov National Purchasing Partners Government

OnStar

Page Wolfberg & Wirth

BRONZE

EMS & FIRE PRO EXPO + CONFERENCE FOXWOODS RESORT CASINO

KLIPWEB

McKESSON

SKEDCO INC. RESCUE EQUIPMENT

University of Pittsburgh School of Nursing

ANNUAL

5.11 Tactical
Bound Tree-Sarnova
Coalition Against Bigger Trucks
General Devices
Handtevy Pediatric Emergency Standards
Logis Solutions
Lowes Home Companies, Inc.
MorTan, Inc., The Morgan Lens
National EMS Museum Foundation
North American Rescue
Pulsara
SAM Medical
Solutions Group
Technimount EMS
The Student Loan Help Group
TrueClot by Luna
Velico Medical

NAEMTNEWS

NAEMT News is the official quarterly publication of the NAEMT Foundation, a not-for-profit corporation of the National Association of Emergency Medical Technicians (NAEMT). NAEMT is the only national membership association for EMS practitioners, including paramedics, EMTs, first responders and other professionals working in prehospital emergency medicine.

NAEMT

P.O. Box 1400
Clinton, MS 39060-1400
MEDIA media@naemt.org
MEMBERSHIP membership@naemt.org
1-800-346-2368

SUMMER 2023
VOLUME 36, NUMBER 3

28

7

WORLD TRAUMA SYMPOSIUM

Join us for a thrilling day of lessons on prehospital trauma care from global experts in civilian and military trauma care.

12

EMS ON THE HILL DAY

Back On Capitol Hill for EMS On The Hill Day 2023.

24

MEMBER SPOTLIGHT

Chief Julius Jackson on teaching the next generation of EMS practitioners, and how growing up on an East Texas farm prepared him for hard jobs.

Features

naemt.org
facebook.com/NAEMTfriends
instagram.com/NAEMTfriends
twitter.com/NAEMT_
youtube.com/TheNAEMT

We Hear You **Loud and Clear**

By Susan Bailey, MSEM, NRP

When looking at the most urgent problems facing the EMS profession, the workforce crisis seems to be on everyone's mind.

During the listening sessions that the NAEMT Board held with our members this winter, participants brought up the ongoing strain of not having enough people to fill all of the jobs that need filling. They talked about feeling stressed, and they wondered if any of the things they were doing to try to bring new people in were going to be successful. They also asked if this was a new normal or if relief would eventually come.

Over the years, some have criticized EMS for being unable to decide if we are healthcare, public health or public safety. I would argue that this isn't confusion on our part. It's the knowledge that we are educated enough to be in all three realms. Our daily activities demonstrate that we are part of healthcare. Treating patients is what most of our education and training entails. With the creation of programs such as mobile integrated healthcare and community paramedicine, and especially during the pandemic, when many EMS practitioners treated patients without transport, it became even more clear that we are firmly in the healthcare realm.

However, we also have public health and public safety responsibilities. Our work in responding to the major public health disaster that was COVID-19, and our rapid response to save lives and transport victims of trauma or other disasters, has shown that we are part of all of these realms.

Granted, there are individuals that do one area better than others. But when needed, we are able to successfully fulfill the tasks of all three.

We carry a heavy load for our communities. Research has shown that the public puts great value and trust in EMS. A survey* by the National Highway Traffic Safety Administration of 5,400 people found that 92% of respondents considered EMS an essential government service, and 92% felt that EMS would know what to do in case of an emergency if they were called.

As a profession, our patients value us and trust us. As a profession, we need to work even harder to make sure that the federal government, which controls so much of the funding that EMS receives, recognizes and adequately values EMS as well.

Updating antiquated reimbursement

The current Centers for Medicare and Medicaid Services (CMS) fee-for-service payment model requires that EMS transport a patient to the hospital, or other approved facility, to receive reimbursement. Insurance companies generally follow the guidelines set forth by CMS.

But when the pandemic hit, CMS and others scrambled to quickly figure out alternatives to taking patients sick with COVID-19 to overwhelmed hospitals. In 2021, under the COVID-19 Public Health Emergency (PHE), CMS authorized waivers that allowed EMS agencies to be reimbursed for caring for patients in their homes instead of transporting, and for transporting patients to alternate destinations.

EMS agencies faced major hurdles with taking advantage of these waivers. A big issue was that the waivers were authorized at a time when EMS agencies and potential partners were also in crisis. They were dealing with sick, quarantining and exhausted staff – not the ideal time for launching complex new programs.

However, EMS agencies that successfully used the waivers demonstrated effectiveness in helping hospitals to increase their surge capacity by having low acuity patients treated at home or transported to alternate healthcare facilities. And they gave EMS the flexibility to navigate patients to the right care, at the right time, and in the right setting.

Unfortunately, these waivers expired when the PHE ended on May 11. This is why NAEMT is strongly advocating for Congress to agree to permanently reimburse EMS for treatment in place (TIP) and transport to alternate destinations (TAD).

What does that have to do with workforce shortages?

With the doors to other workplace options open for EMS practitioners, the EMS workforce crisis is so deep and serious that solutions will not be immediate. Nor are its causes simple, which means we are going to need to try multiple different approaches to solving it.

By achieving reimbursement for TIP and TAD, EMS practitioners will have greater flexibility to provide the care that's actually called for, rather than having to drive every patient to an emergency department. This could take some of the workload off exhausted crews, who may have to wait for hours at an ED to offload patients if a bed isn't available.

TIP and TAD will also result in more appropriate reimbursement for the services that EMS practitioners provide. By recognizing their work in all of the realms, TIP and TAD will make more resources available for EMS, enabling EMS agencies to improve everything from pay to equipment to training opportunities.

*Source: https://rosap.ntl.bts.gov/view/dot/43783

EMS WORLD EXPO
In Partnership With NAEMT
35 YEARS

SEPTEMBER 18–22, 2023
NEW ORLEANS, LA

Improving Patient Outcomes for 35 Years

For 35 years, EMS World Expo has served as the gold standard in EMS education. Each year, thousands of EMS personnel from around the world unite at EMS World Expo to engage in real-world training, participate in high-impact education, and build valuable connections with fellow attendees.

CONFERENCE PREVIEW

- 8 Learning Tracks and 200+ Sessions
- 230+ Renowned Faculty
- Explore Products & Services from 300+ Exhibitors
- Networking Opportunities, Special Events, and More!

NAEMT MEMBERS

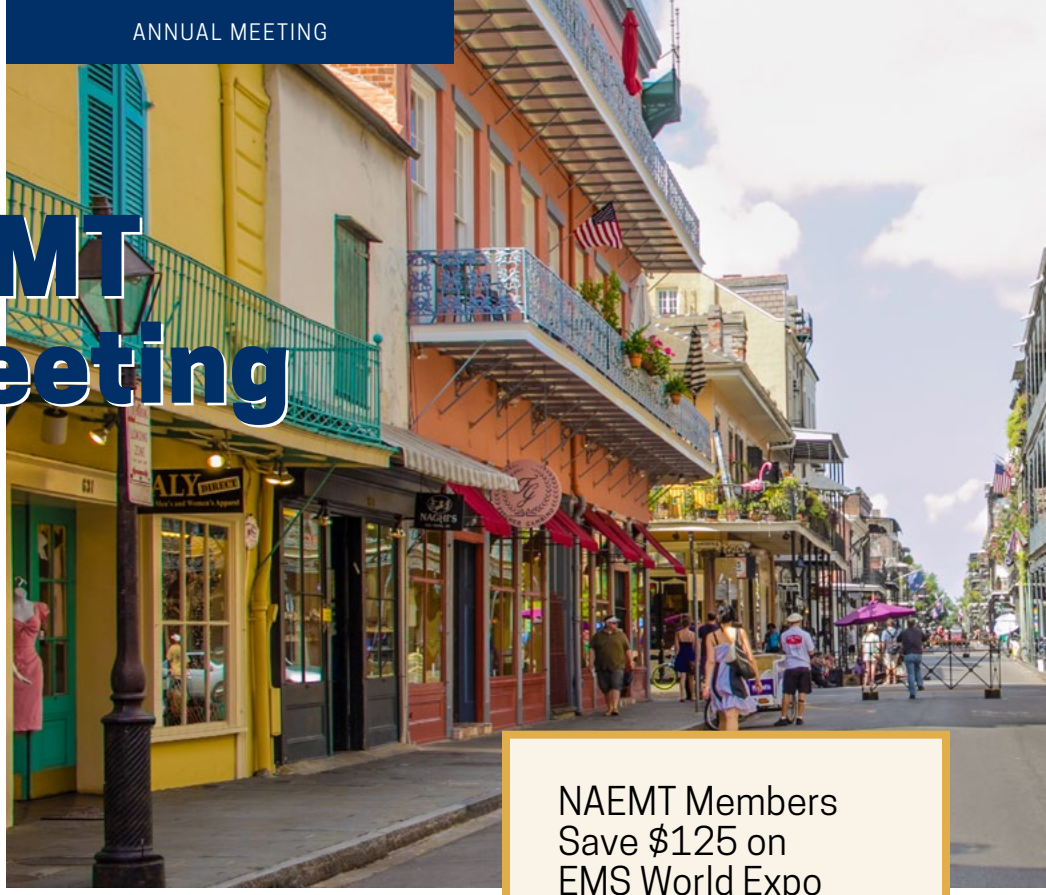
Take advantage of your exclusive NAEMT discount and **save $125** on a 3-day pass.

Scan the QR code or visit emsworldexpo.com to learn more.

HMP Global

YOU'RE INVITED TO THE

2023 NAEMT Annual Meeting in New Orleans



There's no better way to get more involved with your association, hear updates on our latest initiatives, meet NAEMT leaders, and make new EMS connections than by attending the NAEMT Annual Meeting!

Held in conjunction with EMS World Expo in New Orleans, participants can also enjoy the sights, sounds, flavors and rich cultural heritage of one of our nation's most unique cities.

General Membership Meeting and Awards Presentation

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

NAEMT members are warmly invited to attend, at no cost. You'll hear a recap of the year's major initiatives and have the chance to celebrate the 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, please stay for refreshments and a relaxed evening with your EMS colleagues from across the country and around the world.

Other meetings that NAEMT members are invited to attend include:

- ✓ NAEMT Board of Directors, Monday, Sept. 18 from 8 a.m. to 11 a.m.
- ✓ Latin American Education Committee, Wednesday, Sept. 20, 7:45 a.m. to 9:15 a.m. (conducted in Spanish)
- ✓ 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 an invitation in upcoming emails and the *NAEMT Pulse*.

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

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.

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

Extraordinary Lessons in Prehospital Care

Register Now for the World Trauma Symposium 2023

Please join us for the World Trauma Symposium: Extraordinary Lessons in Prehospital Care on Tuesday, Sept. 19. The event provides a thrilling day of presentations and panel discussions on prehospital trauma care, presented by global experts in civilian and military trauma response.

The event will be offered both in-person at EMS World Expo in New Orleans and livestreamed.

The symposium is moderated by Col. (Ret.) Warren Dorlac, FACS, USAF, and Capt. Margaret Morgan, MD, FACS, MC (FS/FMF), USNR. Dorlac is medical director for NAEMT's Prehospital Trauma Committee and Morgan is associate medical director.

Stuart Glover will deliver the Scott B. Frame Memorial Lecture. Glover, a paramedic in New Zealand's capital city, served in the British Army as an operational team medic during combat tours in Iraq and Afghanistan and has worked as a close protection paramedic for an explosive ordnance disposal specialist. He shares a courageous story of the day he went from being a paramedic to a patient, his long recovery, and how these experiences influenced his decision making.

Another can't-miss highlight: a deep dive into the science, implementation, field experience and outcomes of New Orleans EMS prehospital advanced resuscitation protocols with Dr. Juan Duchesne, University Medical Center trauma intensive care unit medical director; Dr. John Hunt, trauma medical director at University Medical Center-New Orleans; Dr. Meg Marino, medical director, New Orleans EMS; and Maj. Tom Dransfield of New Orleans EMS, along with the other paramedics who put the protocols into practice.

Early Bird Rate Until 8/18

In-person event:
$205 / $235 for physicians

Live-streamed:
$120 / $150 for physicians

The in-person event includes a continental breakfast, lunch, and exhibits. Participants can receive up to 8 hours of ACCME or CAPCE-approved CE credits. Fees go up after Aug. 18.

world trauma SYMPOSIUM

Controversies in Airway Management: Pediatrics and Adults
Peter DeBlieux, MD

Industrial Emergencies: Case Studies from New Orleans EMS and the UMC Burn Center
Jeffrey Carter, MD, and Carl Flores, EMT

Sports Trauma-Induced Cardiac Arrest
Timothy Pritts, MD, PhD, FACS

Controversies in TBI Care: Pediatric and Adults
Jeff Elder, MD, and L.J. Relle, BBA, NRP, FP-C, CCP-C

Is it Trauma or is it a Stroke: Field Determination
Tracy Zito, MD, FACS, FRCS(G)

Penetrating Wounding Ballistics
Jay Johannigman, MD, FACS, FCCM

Scott Frame Lecture: From Patient to Provider
Stuart Glover, Paramedic

Dive Emergencies: Case Studies from the Deep
Frank Butler, MD, FAAO, FUHM

Prehospital Advanced Resuscitation
Juan Duchesne, MD, FACS, FCCP, FCCM; Maj. Tom Dransfield, NRP; John Hunt, MD, MPH, FACS; and Meg Marino, MD, FAAP

Why Triage Systems Fail
Lt. Col. Steve Rush, MD, 106th Rescue Wing, NY Air Guard

Tourniquet Field Assessment and Conversion
CSM Curtis Conklin, 44th Medical Brigade, 18th Airborne Corps, U.S. Army

Trauma in the Alaskan Wilderness
Paul Barendregt, EMT-P, CMSgt (Ret.), U.S. Air Force

Ocular Trauma: Prehospital Response
Robert Mazzoli, MD

Burn Trauma
Anne Wagner, MD, FACS

Environmental Trauma: Hypo/Hyperthermia and Reverse Triage
Kenji Inaba, MD, FACS, FRCSC

Learn more or register at naemt.org/events/world-trauma-symposium

NAEMT Preconference Workshops

Highest-Quality EMS Education Created by Leading Experts

The NAEMT preconference lineup at EMS World Expo features a selection of NAEMT's globally recognized courses, developed by expert teams of physicians, educators and EMS practitioners.

NAEMT courses set our profession's highest standard for educational excellence. NAEMT courses use skill stations, videos, case studies and group discussions to encourage critical thinking and learning. All NAEMT courses are field-tested, test items are validated, and feedback from students and faculty is incorporated into curriculum to ensure the best student experience.

We invite you to give an NAEMT course a try if you haven't already!

REGISTER NOW
emsworldexpo.com/workshops

All Hazards Disaster Response (AHDR)

Monday, Sept. 18
8 a.m. to 5 p.m.

The new, 2nd edition All Hazards Disaster Response (AHDR) course teaches students how to respond to many types of disaster scenarios, including natural disasters and infrastructure failings, fires and radiological events, pandemics, active shooter incidents, and other mass casualty events. AHDR educates participants on:

- Elements of an Incident Command System
- Crew resource management
- Communicating effectively during disasters
- Triage systems
- Mutual aid and interoperability
- Triage and transportation strategies and challenges
- Patient tracking and evacuation
- Hazmat disasters

Content is presented in the context of realistic scenarios, culminating with a large-scale mass casualty activity. AHDR is appropriate for all levels of EMS practitioner. This course is offered in the classroom and provides 8 hours of CAPCE-approved credit. Course manual included.

Advanced Medical Life Support (AMLS) 4th Edition Instructor Update *(For current AMLS instructors)*

Monday, Sept. 18
1 p.m. to 5 p.m.

Advanced Medical Life Support (AMLS) is the leading course for prehospital practitioners in advanced medical assessment and treatment of commonly encountered medical conditions. Created by NAEMT and endorsed by the National Association of EMS Physicians, AMLS emphasizes the use of the AMLS Assessment Pathway to best manage patients in medical crises. Now in its 4th edition, the AMLS Instructor Update prepares instructors to teach the revised course.

The 4th edition Instructor Update will:

- Review the changes to the AMLS textbook, course schedule, lessons, patient simulations, and course manual
- Identify key teaching points in the course
- *New!* Demonstrate select AMLS patient simulations by experienced AMLS faculty

The update is for current 3rd edition AMLS instructors. Current AMLS instructors who attend the Instructor Update will be qualified to teach the 4th edition course materials.

Participants will receive 4 hours of CAPCE-approved credit. Textbook and instructor materials are included and will be provided to attendees upon publication.

Geriatric Education for EMS (GEMS) 3rd Edition Course

Tuesday, Sept. 19
8 a.m. to 5 p.m.

The new, 3rd edition GEMS course provides EMS practitioners at all levels with the skills and knowledge to address the unique medical, social, environmental, and communications challenges of older adults. GEMS empowers EMS practitioners to help improve medical outcomes and quality of life for geriatric patients.

GEMS 3rd edition features case-based lectures, videos, patient simulations, and small group scenarios to fully engage students in the learning experience. GEMS covers polypharmacy, toxicity in the older patient, cardiovascular and respiratory emergencies, altered mental status and neurologic emergencies, trauma and other medical emergencies, disaster triage, and palliative care.

Participants receive 8 hours of CAPCE-approved credit. Course manual included.

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*!

UPCOMING Extreme Weather Impacts on First Responders and Patient Care

Wednesday, Aug. 9, noon – 1 p.m. CST

Climate change is causing more extreme and intense weather events – floods, storms, heat waves and wildfires. In 2022 alone, there were 18 weather and climate disaster events that cost a total of $165 billion – the third costliest year on record.

Learn from Sunny Wescott, lead meteorologist for the Cybersecurity and Infrastructure Security Agency (CISA), about how extreme weather is impacting population health and the spread of disease, and what EMS needs to know to prepare for the extreme weather events ahead.

Look for registration information in your email.

RECORDED How to Navigate CMS Compliance for Medicaid Supplemental Payment Programs

Medicaid payments for ambulance services are often 70% less than the cost of providing them. To cover this shortfall, state Medicaid offices and the EMS community have been working together to take advantage of a unique reimbursement mechanism offered by the federal government – Supplemental Payment Programs, also known as the Ground Emergency Medical Transportation Program (GEMT). But EMS agencies must comply with updated Centers for Medicare and Medicaid Services (CMS) policies and fulfill new program requirements. Public Consulting Group experts outlined the recent GEMT changes and best practices for maximizing reimbursement.

RECORDED NAEMT-NAEMSP Winning Formulas for Stroke Assessment and Treatment

EMS response times and recognition of stroke can improve patient outcomes. Yet, there are multiple prehospital considerations in every potential stroke patient encounter: which stroke scale to use, how to best assess patient presentation, streamlining a differential diagnosis, documenting last known well, and determining transport destination. EMS physicians Karen Bowers, MD, MS, MEd, and Bryan Wilson, MD, FAEMS, FAAEM, FACEP, NRP, discussed prehospital recognition and management of stroke and the evidence that informs current guidance.

RECORDED What EMS Needs to Know About Cybersecurity Readiness and Response

According to a report from *Critical Insights*, cybersecurity breaches in healthcare hit an all-time high in 2021, exposing a record number of patients' protected health information. Learn from cybersecurity experts and healthcare leaders about the potential types of attacks, how cyberattacks have impacted EMS operations, the legal implications of a breach, and ways to make your IT systems and EMS data more secure to thwart cyberattacks.

NAEMT Radio Podcast: New Episodes Available!

NAEMT RADIO

Can EMS change economic and service delivery models without sacrificing patient care? Should EMS reduce lights and sirens use? What is NAEMT's latest legislative agenda and how will we try to accomplish those goals on Capitol Hill?

These are just a few of the latest episodes of our new podcast series, NAEMT Radio, now available at naemtradio.podbean.com. Please tune in!

Tips for creating a **culture of workforce engagement**

Improving workforce engagement doesn't just happen. It takes effort and attention. Here are tips on creating a culture that supports deep employment involvement, connection, satisfaction and passion for the job.

While these steps won't solve all of the issues related to retention, they are a starting point to build from. And keep reading to hear from one EMS leader – Susan Long of Allina Health EMS in St. Paul, Minn. – about what she and her team are doing to keep employees engaged.

1 *Take time to get to know your team members personally, celebrate and grieve during personal moments of significance, and recognize their accomplishments.*

In a survey of nearly 1,300 EMTs and paramedics conducted by NAEMT, only 35% of respondents agreed or strongly agreed that their EMS agency provided recognition and praise for excellent performance, while 40% disagreed or strongly disagreed. (The remaining answers were neutral).

2 *Support work-life balance.*

Encourage extracurricular activities and scheduling for school, family and personal needs. One of the biggest areas of stress for EMS practitioners is the feeling that their work-life balance is off – only 37% in the NAEMT survey felt they had a good work-life balance while 40% felt they didn't. About 37% also felt that their work schedule lacked flexibility to allow time with family and friends.

3 *Communicate often, both informally and formally with your workforce.*

In the survey, 48% of respondents said that their managers failed to provide "clear and consistent information to personnel."

4 *Schedule "structured rounding," a concept adopted by hospital leadership to schedule time for management to engage their departments, supervisors, team members and support services on a regular basis.*

5 *Pair leaders, emerging leaders, and team members in mentor partnerships.*

Mentors can be sounding boards for sharing ideas or challenges, provide career guidance, assist with goal setting, and provide encouragement and emotional support. NAEMT recently launched the Lighthouse Leadership Program that pairs experienced EMS leaders with up-and-coming leaders who can benefit from help with developing a career plan, and a strategy for achieving their goals. We need more of this throughout our profession!

6 *Provide opportunities for leadership training or other career-enhancing education.*

Many EMS practitioners want to learn and be the best providers they can. Provide opportunities for growth in their skills and knowledge.

7 *Create workplace committees that include field practitioners.*

Consider designing some to be employee-led and adopt outcomes or goals from these committees.

8 *Create a process for empowering team members through autonomous decision-making within the scope of their position.*

9 *Be encouraging of and willing to discuss differing viewpoints and decisions.*

10 *Conduct annual employee engagement surveys and share results with your workforce.*

11 *Conduct "stay" interviews and exit interviews to gain insights about your agency's strengths and weaknesses.*

Stay interviews are structured discussions that leaders have with employees to learn specific actions that can be taken to strengthen the employee's engagement and retention. Exit interviews are held with employees about to leave an organization, to understand their reasons for leaving and their experiences working for you.

12 *Create a mission, vision, and values statement that embraces diversity, equity, and inclusion, and is developed with your employees' input.*

Your mission statement should articulate your agency's reasons for being, while the vision statement looks ahead to where your organization hopes to go and what it's trying to achieve.

A values statement highlights the core principles that guide the agency and its culture. Your values statement guides the organization in decision-making, and is a framework for the type of environment employees – and prospective employees – can expect from their workplace. Refer back to these principles and make sure your agency is living up to its ideals.

How Allina Health EMS Supports a **Culture of Engagement and Resilience**

What makes a job candidate choose one EMS agency over another? At Allina Health EMS, Susan Long believes that having a culture of workforce engagement could be the difference that makes paramedics pick Allina Health EMS over other potential employers.

"People have the chance to choose a lot of different places to work," said Long, vice president of EMS at the St. Paul, Minn.-based agency.

From agency to agency, pay and benefits tend to be relatively similar. "What is different is culture. Our culture is designed around being supportive of the individual, and being as transparent as we can."

As part of a large hospital system, Allina Health EMS conducts annual employee "experience" surveys. The surveys ask staff for their opinion on statements such as: "My work provides me with a sense of meaning and purpose." "I intend to stay with this organization for the next 12 months." "Senior leadership is honest and communicates effectively."

Allina also conducts exit and stay interviews, which are structured conversations between leaders and employees about what they like and dislike about their job, with a goal of learning more about what can be done to strengthen engagement and retention.

"We want our patients to feel well cared for. We want the same with employees," Long said. "We want them to feel they belong here."

Long said the surveys have provided some valuable insights about what Allina employees care about:

1 **THE RELATIONSHIP WITH DIRECT MANAGERS IS VERY IMPORTANT.** "There's a saying, 'People don't leave jobs. They leave their manager.' We certainly have seen that," Long said. To prepare new managers for the role, they participate in a leadership academy, receive quarterly management training and are mentored by more seasoned leaders.

2 **COMMUNICATION TRANSPARENCY IS CRUCIAL.** "We can't share everything," Long said. But employees value being able to ask questions and receive answers. "Right now, we're not getting a lot of new ambulances. People want to know why. It's because healthcare has been hit hard recently." As a nonprofit, Allina also posts financial statements on the company intranet.

3 **EMS STAFF NEEDS TO FEEL SUPPORTED.** "Every ambulance service is going to have that bad call," Long said. Starting during their orientation, paramedics and EMTs are taught where to go and where to find help and support.

Providing Support

What resources does Allina provide to EMS personnel?

Chaplains: Professional chaplains are people of any faith who provide emotional or spiritual support for individuals in professions that carry great emotional weight, such as EMS. Allina's chaplains are members of the staff who are there to help EMS practitioners cope with day-to-day stress, as well as trauma due to critical incidents, and unwanted memories that can be triggered from past experiences.

Peer support program: Allina developed an internal peer support program with input from psychiatrists and clinical psychologists. Paramedics and other staff members who volunteer for it receive 32 hours of education on building resilience in themselves (so that they can be there for others), communication and listening skills, and navigating those experiencing stress or a mental health crisis to resources. As part of their training, peer supporters also participate in 6 months of group sessions led by mental health professionals.

Employee assistance program (EAP): The EAP has therapists who are familiar with EMS.

Therapy dogs: Evie, Westin and Bohdi are trained therapy dogs who visit bases and dispatch centers when employees need their spirits lifted.

"The goal is resiliency. The world is tough. We all have challenges in our life, and the world the EMS person sees can be some of the worst things you can see," Long said. "That damages your psyche. We're trying to find ways to let people know that it's OK to say, 'That was really hard. I am struggling. I'm trying to figure out what to do with what I saw.' And finding a way to heal from that."

Back On Capitol Hill

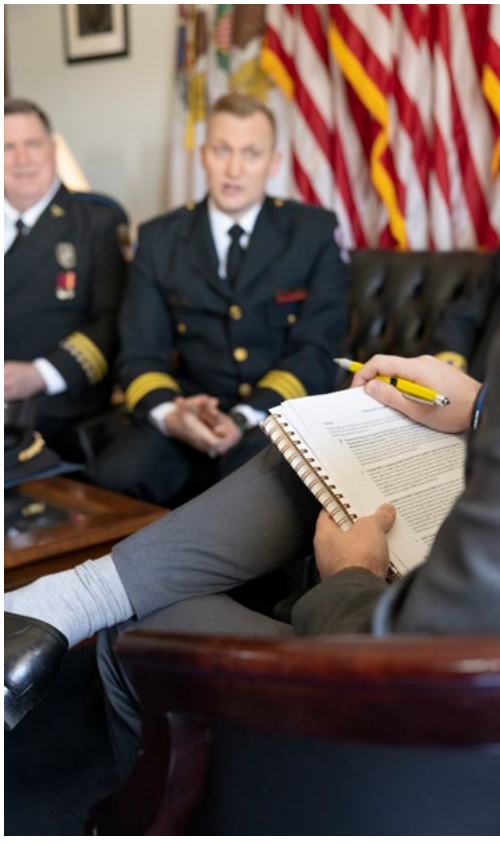
FOR EMS ON THE HILL DAY 2023

After a three-year hiatus, it was wonderful to be back on Capitol Hill for EMS On The Hill Day 2023!

> *NAEMT was thrilled to welcome 240 participants from around the nation to Washington, D.C., to advocate for the EMS profession and our patients.*

On March 29, participants met at the Crystal Gateway Marriott in Arlington, Virginia, for a pre-Hill Day briefing and welcome reception. The following day, paramedics, EMTs and other advocates for EMS headed to Capitol Hill to meet with members of Congress, including representatives, senators and their staff.

"During the past several years of pandemic visitor restrictions, we've been able to hold very productive meetings virtually with members of Congress," said NAEMT President Susan Bailey. "But getting to sit down, face-to-face with our elected representatives in their offices, in our nation's capital, is a very special experience. During EMS On The Hill Day, we get to tell them about the important work that EMS does in all of our nation's communities, and share why we need their support."



NAEMT REQUESTS TO CONGRESS
Support for the EMS Workforce, Reimbursement for Treatment in Place and Alternate Destinations

NAEMT advocacy priorities for 2023 include bills and other initiatives that will help our profession tackle the workforce crisis.

During EMS On The Hill Day, advocates spoke with members of Congress about the need for legislation to support EMS agencies in hiring, training and retaining paramedics and EMTs, and preparing to respond to major disasters and public health emergencies.

Another priority: Seeking reimbursement for treatment in place (TIP) and transport to alternate destinations (TAD).

Under the COVID-19 Public Health Emergency (PHE) declaration, the Centers for Medicare and Medicaid Services (CMS) authorized waivers that allowed EMS agencies to be reimbursed for caring for patients in their homes instead of transport, or transporting patients to destinations other than emergency departments.

This gave EMS the flexibility to navigate patients to the right care, at the right time, and in the right setting. However, these waivers expired in May.

With permanent reimbursement for TIP and TAD, EMS agencies will be paid for the care they provide to patients, whether or not their patients are transported to a hospital emergency room. The additional reimbursements will help agencies improve pay and benefits for their personnel, one of the top reasons cited by EMS practitioners for leaving the EMS profession.

Please use our Online Legislative Service to continue advocating for the EMS workforce and our patients!

EMS On The Hill Day is a tremendous opportunity for our profession to come together as a unified group to voice our perspectives to our nation's top elected officials. But advocacy is a year-round effort. Please use our Online Legislative Service to let your elected officials know why they need to support EMS and our legislative priorities.

Visit naemt.org. Under Advocacy, select "Online Legislative Service."

Here's a summary of NAEMT's legislative and advocacy priorities for 2023:

- ✓ Expand the Hospital Preparedness Program to include $50 million to fund an EMS Preparedness and Response Workforce Shortage Program. Grant funds would support the recruitment, training and retention of EMS personnel, including tuition, continuing education, and licensure and certification costs.
- ✓ Include EMS in federal grants, offered through the Department of Labor and other agencies, that support apprenticeship programs. Apprenticeship programs are used for workforce development in sectors of the economy that need workers. Currently, there are no federal grant programs to support EMS apprenticeships.
- ✓ Support the EMS Counts Act of 2023, which directs the Bureau of Labor Statistics to include occupation categories for firefighter, firefighter/EMT, firefighter/paramedic, and firefighter, all other. These changes will address the chronic undercounting of EMS personnel by enabling firefighters to identify themselves as cross-trained EMS practitioners. The EMS Counts Act was introduced in the Senate by Sen. Bob Casey (D-PA) and Sen. Susan Collins (R-ME), and in the House by Rep. Susan Wild (D-PA) and Rep. Fred Keller (R-PA).
- ✓ Hold congressional hearings on the EMS workforce crisis. We ask Congress to hold hearings on the EMS workforce crisis so that legislators and federal agencies with jurisdiction over EMS can better understand the causes for the exodus of the EMS workforce from the profession and the impact that it is having on communities across the country.
- ✓ Support the Protecting Access to Ground Ambulance Medical Services Act of 2023 (S. 1673/H.R. 1666). Introduced by Sens. Catherine Cortez Masto (D-NV), Susan Collins (R-ME), Debbie Stabenow (D-MI) and Bill Cassidy, MD (R-LA) in the Senate and by Reps. Brad Wenstrup (R-OH), Terri Sewell (D-AL), Buddy Carter (R-GA) and Paul Tonko (D-NY) in the House, the legislation extends temporary "add-on" payments for ground ambulance services, until the Medicare ambulance fee schedule is reformed. These additional reimbursements are vital to the financial stability of many ambulance services.
- ✓ Fund SIREN grants to $20 million in fiscal year 2024. Also known as Rural EMS Equipment and Training Assistance grants, the program is for public and non-profit EMS agencies and fire departments in rural areas to support recruiting, retaining, educating, and equipping EMS personnel. In fiscal years 2020 and 2021, when SIREN was funded to $5 million and $5.5 million, 27 EMS agencies were awarded grants ranging from $92,000 to $200,000.

Congratulations to the **2023 NAEMT EMS Advocate of the Year Award** Recipients

Pictured left to right: NAEMT President Susan Bailey, Michael Pollock, Phoebe Prentiss (daughter of Sue Prentiss), Chris Way and Steven Kroll at the reception following EMS On The Hill Day.

EMS Advocate of the Year Awards recognize EMS professionals whose volunteer efforts advance EMS through educating and engaging elected government leaders, the EMS community, the wider healthcare community, and the public. Recipients were honored on March 30 during the reception following EMS On The Hill Day.

SUE PRENTISS, BA, MPA, is a paramedic and New Hampshire state senator. Prentiss has held leadership positions in healthcare and public safety at the local, state, regional and national, levels. She previously was chief of EMS for the New Hampshire Department of Safety. She served six terms as a Lebanon City Councilor and two terms as mayor before her election to the state Senate in November 2020. She was named executive director of the American Trauma Society in 2018. In 2022, she was appointed to the National Highway Traffic Safety Administration's (NHTSA's) National EMS Advisory Council.

MICHAEL POLLOCK has volunteered with Brighton Volunteer Ambulance in Rochester, New York, for 35 years. His roles have included EMT, MCI coordinator, dispatcher and public information officer. Pollock also worked for 40 years in law enforcement, including as a sergeant for the New York State Department of Corrections and as a rehabilitation counselor with the Monroe County Sheriff's Office. Pollock has also volunteered as a firefighter and an advisor to Ezras Nashim, an all-female Orthodox Jewish EMS agency. He has received numerous honors and awards for his volunteer work and service to the community.

STEVEN KROLL, EMT, MHA, is executive director and volunteer chief of Delmar-Bethlehem EMS in Albany County, New York. He is also the chief delivery officer at UCM Digital Health, a telehealth triage, treatment, and navigation medical practice, where he helped develop UCM's EMS treat-in-place telemedicine program, and chair of the board of trustees for Cobleskill Regional Hospital in Schoharie County. Kroll has served as vice president of governmental affairs at the Healthcare Association of New York State, and as past chair of his state's EMS Council. He is NAEMT's advocacy coordinator for New York and vice chair of the NAEMT Advocacy Committee.

EMS Legislator of the Year

Thank you, Rep. Debbie Dingell, who was selected as the 2023 NAEMT EMS Legislator of the Year.

The award recognizes a member of Congress who demonstrates outstanding support for EMS and high-quality prehospital and out-of-hospital emergency medical care. Dingell (D-MI) was recognized for her leadership of the House EMS Caucus, a bipartisan group of legislators who promote and increase awareness of EMS issues.

"EMS professionals are on the front lines of our health and public safety systems, and they provide lifesaving services in some of the most difficult circumstances. Especially throughout the last few years of the COVID-19 pandemic, EMS providers have literally been lifelines for our communities. I am honored to be named EMS Legislator of the Year," Dingell said.

Congratulations to **Our Scholarship Winners!**

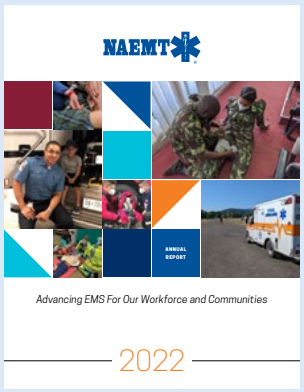
NAEMT education scholarships support full NAEMT members in advancing their education and careers. To apply or learn more, log in to the Member Portal and click "Scholarships." Thank you to NPP.Gov and Page, Wolfberg & Wirth for sponsoring NAEMT's EMS scholarships.

EMT to Become a Paramedic *(up to $5,000)*

MATTHEW KALINSKY, *Brush Prairie, Washington*
Matthew Kalinsky was inspired to go into a service profession by his father, a New York City police officer. An Eagle Scout, Kalinsky earned his bachelor's degree, became an EMT, worked in a homeless shelter, and wants to become a firefighter-paramedic.

Advanced EMS Education for Paramedics *(up to $2,000)*

VERNON CARROLL, *Leesville, South Carolina*
Vernon Carroll is a paramedic and assistant director for Saluda County EMS. A father of three who helped lead his EMS agency in certifying nearly 400 members of the community in CPR last year, Carroll plans to use the scholarship to earn a bachelor's degree to prepare him for EMS leadership roles.

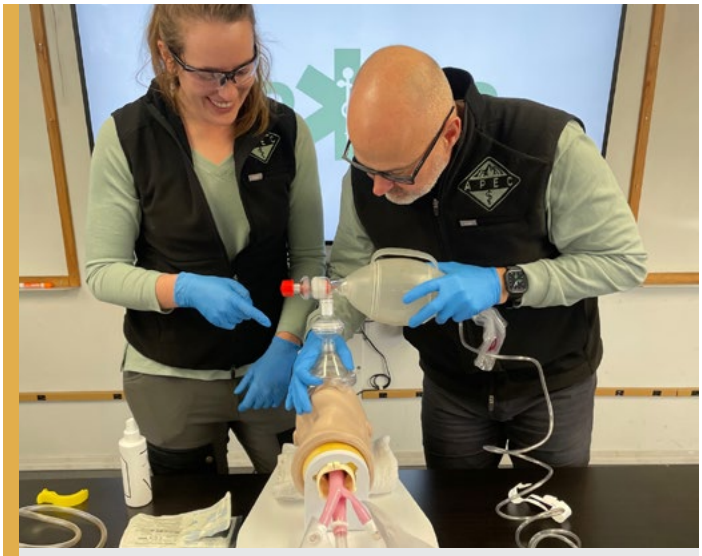


In Case You Missed It: The 2022 NAEMT Annual Report is available at naemt.org/about-naemt. The report highlights our association's accomplishments and activities, as well as the contributions of the volunteers and partners who help make NAEMT a success.

We had a great time visiting with NAEMT members from Indianapolis EMS at the FDIC International 2023. Indianapolis EMS (IEMS) is an NAEMT agency member and provides over 350 individual memberships to their staff. Thank you IEMS for your support!

Thank you Utah Membership Coordinator Christian Neilsen for doing such a great job representing NAEMT at the Utah Association of Emergency Medical Technicians Conference.

NAEMT Indiana Education Coordinator John Zartman is ready to share the benefits of NAEMT education at FDIC 2023.



Welcome New Agency Members

NAEMT warmly welcomes our newest agency members to the NAEMT family.

- Alaska Prehospital Education Consortium, Wasilla, AK
- Charleston Fire Department, Charleston, SC
- City of Mathis EMS, Mathis, TX
- Dubuque Fire Department, Dubuque, IA
- New Madrid County Ambulance District, New Madrid, MO

COME SEE US

We love getting to meet our members in person. Please stop by the NAEMT booth to say "hi!"

SEPT 18-22	**EMS World Expo** New Orleans, LA
OCT 19-22	**Vital Signs** Syracuse, NY
NOV 2-5	**Colorado EMS Conference** Keystone, CO

2023 NAEMT National Survey on MIH-CP Programs

Executive Summary

NAEMT has been on the forefront of promoting transformative EMS delivery models, most notably, mobile integrated healthcare and community paramedicine (MIH-CP) programs. The mission of MIH-CP programs is to partner with stakeholders to proactively help patients better manage their healthcare needs to reduce preventable acute care utilization, such as 911 activations, emergency department (ED) visits, and hospital admissions. In rural and super rural areas, community paramedics may serve as primary care physician extenders, providing healthcare services in areas lacking other types of providers.

Numerous studies have proven that EMS-based MIH-CP programs result in improved patient outcomes through reduced acute care utilization, enhanced patient experience, and reduced costs.

Over the past decade, NAEMT has compiled information on over 400 EMS agencies nationwide in 42 states that have launched MIH or CP programs. In March 2023, NAEMT surveyed these agencies to determine the current status of their programs. NAEMT also asked other national associations to share the survey link with their networks of MIH-CP programs. We received 199 unique responses.

Despite evidence that demonstrates the value of MIH-CP programs, the survey found that EMS agencies continue to face major challenges when trying to enhance the typical EMS delivery model beyond serving as an emergency response and transportation system. Those obstacles include: lack of sustainable funding, regulatory barriers, and workforce challenges.

Funding

Very few EMS agencies have been able to financially sustain MIH-CP programs.

Historically, the Centers for Medicare and Medicaid Services (CMS) and commercial insurers only reimburse EMS when a patient is transported to a hospital. Since MIH-CP often involves providing services in the home without transport, or potentially providing transport to a healthcare facility other than an emergency department, this posed major funding obstacles.

MIH-CP programs that have achieved financial sustainability have economic models in which stakeholders are financially at risk for the patient's cost of care. These models include Medicare and Medicaid managed care organizations (MCOs), hospitals at risk for readmission financial penalties, accountable care organizations (ACOs), and hospice agencies. In rare cases, MIH-CP programs are funded by tax revenue, as part of EMS budgets, because the local community perceives value from the program. There are also a few states which have appropriated funds to support community paramedicine programs in rural areas.

Until Medicare and commercial insurers understand the economic value of MIH-CP programs through reduced downstream healthcare expenditures, and as such, are willing to pay for this EMS system delivery enhancement, the long-term sustainability of these programs is nearly impossible.

Regulatory Barriers

EMS is regulated by states. Some states have embraced the MIH-CP model. These states include Colorado, Florida, Georgia, Minnesota, and Texas. Other states have essentially prevented MIH-CP programs from being implemented through substantial regulatory barriers. Those states include California, Connecticut, Maryland, Massachusetts, and New York.

Workforce Challenges

Prior to the COVID-19 pandemic, EMS agencies were struggling to retain and recruit EMS practitioners. The struggle turned into a crisis during and post-pandemic. For many MIH-CP programs, pandemic-era challenges became a breaking point for programs already struggling to stay viable. Many MIH-CP programs participating in the survey indicated that they ceased operations due to the staffing crisis.

MIH-CP programs could help the staffing crisis by adding steps to the career ladder for EMS personnel, and

reducing the volume of low-acuity responses, which are often cited as a primary driver for dissatisfaction among the EMS workforce.

Where do we go from here?

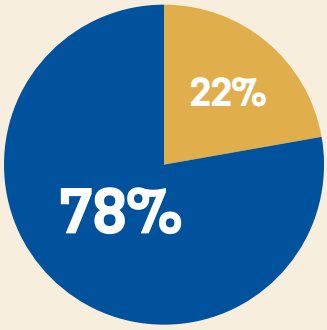
The responses to the survey illustrate that the lack of sustainable funding, regulatory barriers, and ongoing EMS workforce shortages are the primary reasons MIH-CP programs have not been sustainable, and why many agencies do not even pursue this valuable service delivery model.

Insufficient reimbursement for EMS care and a lack of federal investment in EMS are long-term problems that have been building for decades. The additional burdens placed on EMS systems and personnel during the pandemic exacerbated the challenge, pushing many EMS systems in our country to the brink.

During the pandemic, CMS waived regulations that reimburse EMS for only transportation to hospitals, and instead allowed reimbursement for EMS to transport patients to alternative healthcare facilities or for providing treatment in place. EMS proved it could reduce the strain on the overall healthcare system and offer the most appropriate patient care for low acuity patients. EMS reimbursement for treatment in place, facilitating telehealth consultations, transport to alternate destinations, and MIH-CP services relieve the stress on hospital emergency rooms, support the ability of hospitals to increase their surge capacity when needed, and most important, provide quality patient-centered care to patients.

NAEMT, along with other national EMS and fire organizations, is actively advocating for federal legislation that would reimburse EMS for the care we provide rather than solely for transportation to an emergency room. We call on Congress, state and local officials, and commercial insurers to implement sustainable revenue for MIH-CP services and other non-traditional EMS care. We also ask state regulators to assure a regulatory framework that facilitates more patient-centered care through EMS-based MIH-CP programs.

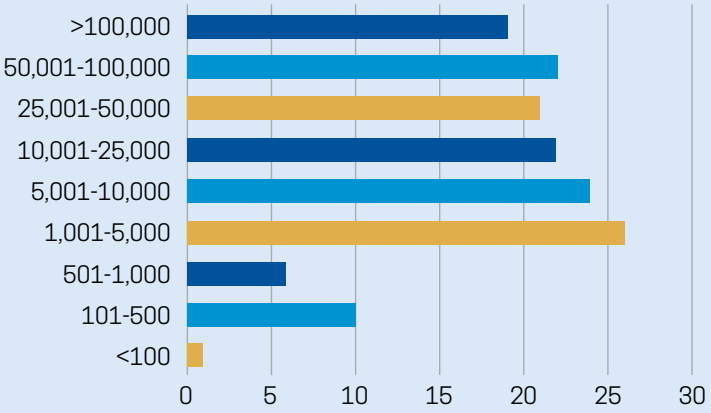
AGENCIES SURVEYED



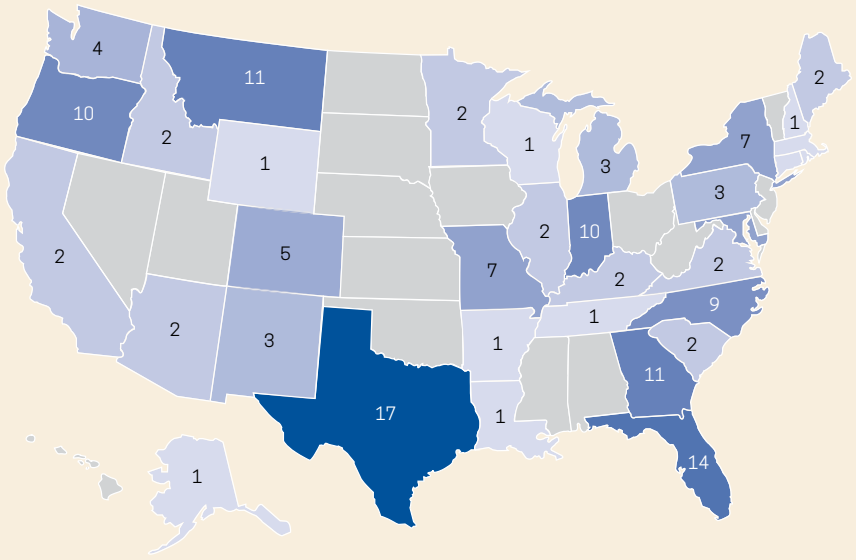
- Offering nontraditional services (156)
- Not offering nontraditional services (43)

Of the organizations not currently offering nontraditional services, 45% reported that they have never offered nontraditional services due to funding challenges. Of those that terminated their programs, the most common reasons cited included loss of funding, staffing, or other resources.

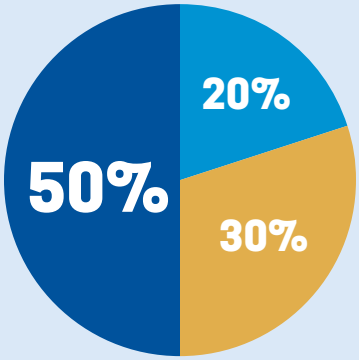
ANNUAL RESPONSE VOLUME



OUR AGENCY IS HEADQUARTERED IN



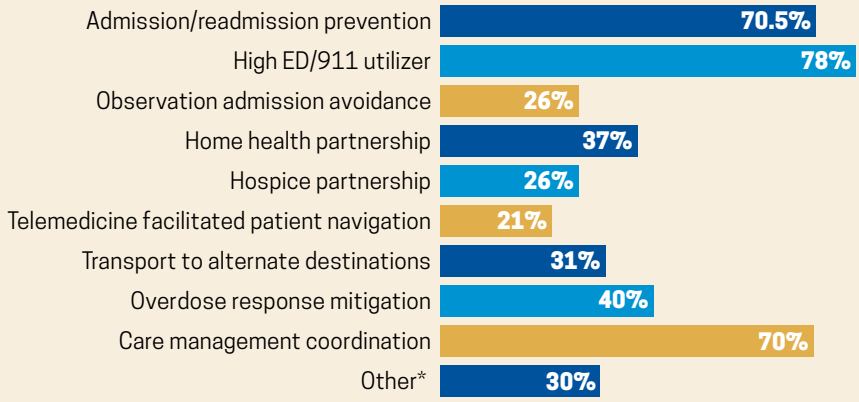
DEMOGRAPHIC REGION



- Urban/Suburban
- Rural/Super Rural/Frontier
- Suburban/Rural

NONTRADITIONAL SERVICES OFFERED

Admission or readmission prevention, high emergency department/911 utilizer programs, and care management coordination are the most common nontraditional services offered.



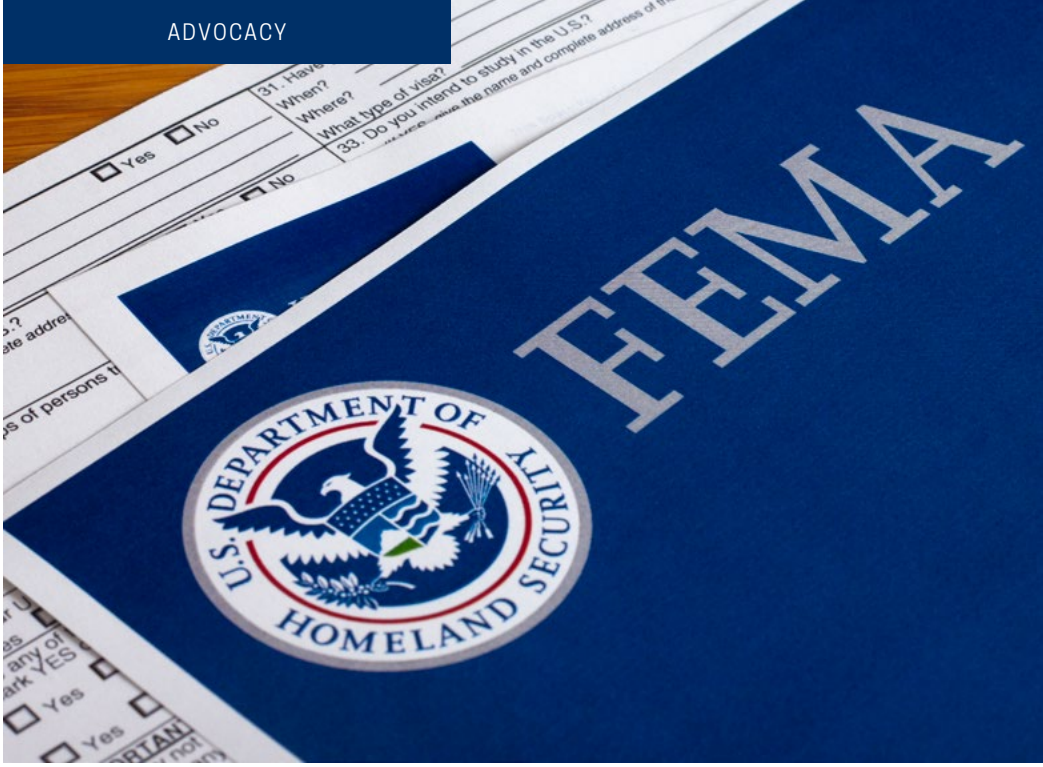
Respondents reported a wide range of other types of nontraditional services, including:

- Fall assessment and prevention
- Mobile crisis response
- Homeless navigation and resources
- Case management
- Testing and immunization
- Mental health care navigation
- Community risk reduction
- High risk OB
- In-home blood draws
- Hospital at home program
- Medication-assisted treatment induction
- Telemedicine
- Lift assists
- Appointment navigation
- CHF and diabetes management
- Adult/child protective services
- Remote patient monitoring
- PharmD med reconciliations
- Reverse triage
- Primary care connect
- Medicare partnership
- Insurance payor partnership
- Hemophilia clotting factor delivery and administration

MIH-CP SERVICES DIFFER BY DELIVERY MODEL

	Admission/ Re-admission Prevention	High ED/ 911 Utilizer	Observation Admission Avoidance	Home Health Partnership	Hospice Partnership	Telemedicine faciliated patient navigation (911 ED diversion)	Transport to alternate locations	Overdose response mitigation	Care managment coodination	Other (please specify)
fire-based	57%	82%	15%	29%	19%	16%	28%	50%	69%	26%
hospital-based	96%	67%	42%	50%	21%	25%	13%	21%	63%	21%
private for-profit	67%	47%	27%	40%	33%	47%	40%	0%	60%	40%
private non-profit	93%	67%	40%	33%	27%	0%	33%	20%	60%	33%
public city	50%	75%	0%	50%	75%	0%	50%	0%	50%	0%
public county	63%	89%	32%	37%	32%	11%	37%	63%	89%	26%
public regional	60%	80%	40%	40%	40%	60%	60%	40%	60%	60%
public utility	0%	100%	0%	0%	0%	0%	0%	0%	0%	100%

Positions, Letters and Comments



NAEMT Position Statement
EMS Should Be an Emergency Support Function Within the National Response Framework

In a new position statement, NAEMT has called for FEMA to establish an Emergency Support Function specifically for EMS within its National Response Framework. The framework guides FEMA's response to disasters and emergencies.

Currently, there are 15 Emergency Support Functions (ESF). Examples include Communications, Public Works/ Engineering, Firefighting, Logistics, Search and Rescue, Energy, and Public Safety and Security. EMS is included in Emergency Support Function #8: Public Health and Medical Services.

"By establishing a stand-alone ESF for EMS and decoupling it from ESF #8, the federal government will be able to acknowledge EMS as a separate critical task within disaster response at the state, tribal and local levels during natural or man-made disasters, health crises, mass casualty incidents, acts of terrorism, and planned and unplanned public events," the NAEMT position statement reads.

FEMA recruits EMS practitioners to provide medical care and services in disaster response and public health crises. Yet without an ESF, "EMS is not recognized and has no function-specific federal designation," the statement says.

"The absence of this designation results in a lack of direct guidance and support for EMS during public health crises, emergencies and disasters. Once EMS is assigned a specific ESF, it will allow for direct federal coordination and efficient utilization of EMS assets in supporting community lifelines."

NAEMT Position Statement
Standardize the Role of EMS in DHS Fusion Centers

After 9/11, the U.S. Department of Homeland Security created "fusion centers" to enable federal, state, tribal and local government, law enforcement and other public safety entities to exchange information about potential or emerging threats.

In a position statement, NAEMT recommends standardizing EMS participation in fusion centers across the national network. This would ensure that fusion centers receive accurate, real-time information from EMS, and promote a better flow of information to EMS to improve responder situational awareness and safety. There are about 75 fusion centers nationwide.

"Fusion centers should work with EMS agencies through an agency-appointed field liaison officer trained in suspicious activity reporting (SAR) to obtain local intelligence and, in return, provide relevant intelligence to disseminate back to the agency," the statement reads.

"In many instances, EMS practitioners are the first to notice suspicious activity, some of which can be linked to a variety of threats, including violence, crime, and CBRNE. EMS routinely captures data on its patients and the response scene. However, inconsistent utilization, mining and integration of EMS data diminishes a fusion center's threat analysis and ultimately the nation's ability to identify, prepare for, and respond to threats, disasters and public health emergencies."

Ways that EMS can be a valued partner to fusion centers:

- Trained EMS practitioners can be used as intelligence sensors to identify suspicious indicators of terrorism and to report those indicators to intelligence fusion centers.
- EMS managers can provide medical intelligence within fusion centers to help those centers analyze medical data that could provide indicators of potential threats.
- EMS managers can develop and disseminate medical intelligence briefs, which inform EMS, fire, law and other responders of medically based threats to their health and safety.
- EMS can be the lead developer of multidisciplinary mass casualty response plans and other emergency medical-related planning and exercising, including networks of ambulance strike teams to respond to areas devastated by catastrophic events. EMS data can augment and enhance current syndromic surveillance systems to provide earlier warnings of a pandemic or terrorist incident.

18 Senators Sign On To Letter In Support of Increasing SIREN Grant Appropriations

Eighteen U.S. Senators signed on to a letter to the Senate Subcommittee on Labor, Health and Human Services, Education and Related Agencies in support of increasing appropriations for SIREN grants in fiscal year 2024. The SIREN grants, which were funded to $10.5 million in fiscal year 2023, can be used to pay for EMS equipment, training and personnel by public and nonprofit EMS agencies in rural areas.

LETTERS TO CONGRESS

Fund EMS Workforce Grants

In a letter to the U.S. House and Senate Appropriations Committee, NAEMT, the American Ambulance Association (AAA), and the National Rural Health Association (NRHA) requested that Congress fund workforce grants for EMS agencies. The letter asked that Congress appropriate $50 million in fiscal year 2024 to the Assistant Secretary for Preparedness and Response (ASPR) to fund grants to EMS agencies to support training and retention programs, tuition, continuing education, costs related to licensing and certification, and other support for individuals seeking EMS training.

Unrepresentative Committee Composition

NAEMT submitted comments to the U.S. Department of Health and Human Services raising concerns about the makeup of a federal advisory committee looking at ground ambulance patient billing. In the letter, NAEMT noted that the Ground Ambulance and Patient Billing Advisory Committee (GAPB) fails to include representatives from volunteer or third-service ground ambulance services, and includes only one member with experience managing a fire-based EMS agency.

In addition, several appointees work as paid consultants for private EMS companies. "These appointees' apparent conflicts of interest, combined with a lack of equal representation for the major segments of the industry, prompt our continued concern about the recommendations that the GAPB will provide to Congress."

Fund EMS for Children

In a letter to the Senate Subcommittee on Labor, Health and Human Services, Education and Related Agencies, NAEMT asked for $28 million in funding for the EMS for Children (EMSC) program in fiscal year 2024. EMSC is dedicated to improving emergency care for kids.

MEMBER SPOTLIGHT

Julius Jackson

Director, Emergency Medical Services Program
Eastern Senior High School
Washington, D.C.

Julius Jackson believes in learning by doing. So for this year's EMS On The Hill Day, he brought 10 students from his EMT class at Eastern Senior High School in Washington, D.C., to Capitol Hill to participate in advocacy and see democracy in action.

"It's one thing to see it on TV. It is another thing for students to sit in the gallery and hear members of Congress argue about the issues of the day," said Jackson, better known as "Chief Jackson" by his students.

The teens met with House Del. Eleanor Holmes Norton, the District of Columbia's nonvoting representative to Congress, and attended meetings with EMS advocates and legislators from Delaware.

In the cafeteria, a Senator's mother who was also visiting for the day was charmed by the teens and bought them breakfast. When they joined their EMS colleagues for the group photo on the Capitol steps, "a great number of the leaders were keenly interested in who these high school students were. They stole the show," Jackson said.

Jackson told *NAEMT News* about why he's dedicated to teaching the next generation of EMS practitioners, and how his childhood on a farm in Texas prepared him for working in jobs ranging from EMT to dignitary protection coordinator in Washington, D.C.

Chief Jackson with his students and a fellow instructor from Eastern Senior High School.

Tell us about your background. What was farm life like?

My family has been in east Texas since the 1880s. I was blessed to grow up on a multi-generational working farm. We had more than 100 cows, 200 pigs and a vegetable garden the size of a football field. That is my heritage. I am as country as a turnip green.

My city kids here have no concept of wrangling cattle or doing farm chores before they go to school. We had to work cattle in the heat and the cold. If the cows got out before school, we had to get them back on our property before we went to school.

How did you get involved in EMS?

I was an Eagle Scout, and a Civil Air Patrol cadet. As a student at Texas A&M, I got my EMT certification and joined the campus emergency response team. After college, I worked as an EMT for East Texas Medical Center EMS, and enlisted in the Texas State Guard as a military policeman.

How did you go from the Texas State Guard to working in D.C.?

My hometown Congressman had known me from scouting and Texas A&M. He called and asked me to apply for a job as his staff assistant on Capitol Hill. About nine months later, I got a call from the White House to be interviewed for a presidential appointment by George W. Bush. I became a special assistant to the deputy secretary of transportation.

Presidential appointments end with that president's administration. So, the next part of my adventure was serving as social secretary at the European Union Embassy, and then as special assistant to the president of Amtrak. I returned to public safety when I became a dignitary protection coordinator for the Amtrak Police Department, where I helped to arrange security support for distinguished foreign officials and dignitaries traveling by train in the U.S.

Meeting with Del. Eleanor Holmes Norton during EMS On The Hill Day.

Do you think your EMS background helped you get these positions?

My background in EMS helped me fit seamlessly into incident management and made me an asset in training for or responding to medical emergencies. My ability to manage incidents and deal with high stress situations served me well in all these other areas. They knew I was a person who was accustomed to long hours and having major responsibilities while I was at work. It also helped that I was accustomed to being in environments where privacy and security of information was a major concern.

Getting into the spirit of Halloween for the kids at Eastern Senior High School.

What drew you to teaching high school EMS education?

When I got called to Washington, it pressed pause on my active, daily EMS life. But I maintained my EMT license.

I was working for an organization that had a contract to deliver EMS education to D.C. public schools. That organization eventually closed, but I convinced the school district to establish their own EMS education institution that could be accredited by the state. Today, our program is a four-year academy of health sciences that is fully integrated and organic to the high school. EMT is a capstone course for seniors.

This fall, we may open up the EMT course to adults in the community. This would increase our revenue and allow us to broaden the people we can get into the EMS industry.

Workforce shortages are a major issue in EMS. Why is it important to get young people into EMS before they've left high school?

In a way, high school is too late. In the K to 12 world, there is research that is beginning to show that young people need to be enticed toward careers or made aware of careers as early as middle school. If we wait too long, they may have habits and activities that will close doors for them. In today's world, some young people are caught up in the unintended consequences of legalized marijuana. They are experimenting and gaining a criminal record, which would close doors in a lifelong sense, by preventing them from being able to experience public safety careers.

How do high school EMS programs benefit young people?

Making EMS available in high school allows young people to begin their life outside of high school with something useful, something important and something that allows them to start building a professional life.

The skills they learn in EMS can be applied to any future profession, without exception. There is great value in all career training programs which put young people through a formal course of education and ask them to meet a professional-level standard.

Teaching students to use a stair chair.

How do you keep your EMS skills fresh?

I still work part time as an EMT for Lifestar Response of Maryland. I require our EMS faculty to be in active practice and insist on leading from the front. It allows me to speak to my students about what they are going to face when they begin their clinical rotations, or when they begin working in the field, because I am right there with them.

During the pandemic, I went on the front lines as a team leader within a regional High Consequence Infectious Disease Special Response Team. The first time an ambulance picked me up at school, the principal and the few teachers allowed on campus realized that what I teach is a world apart from general education. It's literally life and death.

That year, our principal decided that EMS should always be offered to students as a career option because there will always be people who will need help.

When your students pass the National Registry exam, what does it mean to them?

It's an opportunity for them to change their lives and their families lives for generations. We have great income disparities in Washington, D.C., and my students come from a socioeconomically depressed area.

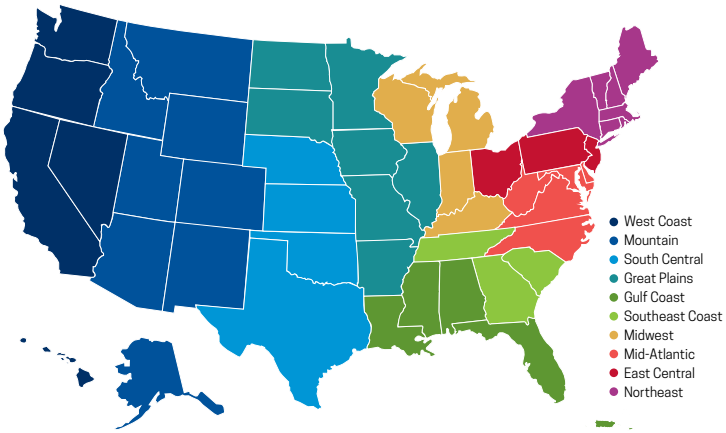
The average starting pay for an EMT in this area can be up to $30 an hour, with no experience. That is a life changing opportunity for anybody. For an 18-year-old kid, with zero days of doing anything but school, they get that job and they know they can actually do things. They are extremely proud of that. They find people look at them in a different way when they are seen in their uniforms. They have raised their hands to say, "I will be here for humanity. I will be here for people in their darkest day. Send aid. Send me." That is a big deal.

What do you do when you're not working?

I go to church every Sunday. Afterward, I will spend a few hours walking, going in whatever direction I think of. I love the city. Sometimes I will pop into an antique shop. Sometimes I will wander through a museum or a flea market. I'm usually wearing a 3-piece suit, because it's what I wear to church. One of my hobbies is studying heraldry, the art behind coats of arms and symbols. Sometimes I just take pictures of the heraldry of Washington. I know the language of it. I'd like to publish a book on it someday.

After church, Jackson enjoys visiting D.C. antique shops and museums in his Sunday finest.

Call for Candidates for the 2024-2025 NAEMT Board



NAEMT is seeking candidates for open positions on the NAEMT Board of Directors for the 2024-2025 term. Volunteer leaders fulfill a vital role for NAEMT and help our association carry out its mission of representing and serving the entire EMS profession through advocacy, education and research.

NAEMT members should be aware of changes to this year's elections, which will be held from Oct. 15 to 28.

In 2022, the NAEMT Board increased the number of voting regions and eliminated the at-large director positions.

There has been no change to the total number of directors, which remains at 10.

However, instead of four large regions, each with two directors, and two at-large directors, there are now 10 geographic regions, each with one director. By dividing the U.S. into smaller geographic regions, the board's goal is to make it easier for directors to personally connect with the members in the region they represent. Regions were set to have an approximately equal number of active NAEMT members in each region.

The NAEMT Board also includes five officers: president, president-elect, secretary, treasurer and immediate past-president.

Open Positions

NAEMT has open director positions for the 2024-2025 term in the following regions:

- **Region 2 East Central**
  NJ, PA, OH
- **Region 3 Mid Atlantic**
  DE, MD, DC, VA, WV, NC
- **Region 4 Southeast Coast**
  SC, GA, TN
- **Region 6 Midwest**
  KY, IN, MI, WI
- **Region 9 West Coast**
  CA, OR, WA, NV, HI, INT (International)

Who is qualified to run for the board?

You must be an active NAEMT member for at least two consecutive years immediately preceding the election; be currently engaged as an EMS practitioner, EMS manager or EMS instructor of initial or continuing education serving an average minumum of 15 hours/week; and have demonstrated commitment to the association by participating in association programs or activities within the two years immediately preceding the election. Additionally, you must reside in the region that you will represent as director.

Find full eligibility details at naemt.org > About NAEMT > Board of Directors > Elections.

Election Timeline

July 15 to Aug. 15 – Candidate submissions accepted.

Oct. 1 to 28 – Candidate statements posted online along with each candidate's responses to questions posed by the NAEMT Candidacy and Elections Committee.

Oct. 15 to 28 – Online voting is open.

Please Vote!

We kindly ask all active NAEMT members in regions with open seats in this election cycle to participate in the NAEMT Board elections.

To receive notice when voting is open, please make sure your membership is up to date, and that your member profile includes current information, including a valid email address.

Need to renew or upgrade your membership, or update your member profile? Login to the Member Portal at naemt.org. Or contact membership@naemt.org or call 1 (800) 346-2368.

Paper ballots are available by written request to NAEMT no later than Oct. 1.

David Mangino, Amy Wolfley Segale and David Hahn (left to right) take a break to enjoy the scenery on the West Coast Route.

National EMS Memorial Bike Ride

Honors EMS Practitioners Who Have Passed

Gone but not forgotten.

Matt Lambert (left) and Brian Shaw (right) on road from Boston to Washington, D.C.

Each spring and summer, groups of paramedics and EMTs hit the road on bikes to celebrate the lives of their colleagues who have died in the past year.

Carrying dog tags imprinted with each honoree's name, riders peddle past some of the nation's most picturesque, iconic places: through the aspen groves of the western Rockies, over San Francisco's Golden Gate Bridge, and even through the streets of Manhattan, where they once made a stop to pay their respects at St. Patrick's Cathedral, before hopping the ferry to Staten Island.

"One of the best and most touching ways of being honored is by your peers," said Brian Shaw, president of the National EMS Memorial Bike Ride, Inc., which organizes the rides.

"We are recognizing our peers who have provided honorable service to their communities, to their family, to their coworkers. Whether they have lost their lives in the line of duty or passed for some other reason, this is our way of making sure everyone knows what they mean to their families and to their communities."

The Golden Gate Bridge is a highlight at the end of the Reno to San Francisco ride.

Boston roots

The first EMS memorial ride was held in 2001, when members of Boston EMS rode to the National EMS Memorial Service, then held in Roanoke, Virginia.

Just a few months later, the unthinkable occurred: the Sept. 11 terrorist attacks. "After 9/11, participation really jumped," said Shaw, a paramedic who is also deputy director for EMS West in Pittsburgh.

Enjoying the view of the Statue of Liberty on the Staten Island Ferry.

> *This is our way of making sure everyone knows what they mean to their families and to their communities.*

Today, there are five multi-day rides, held from May through September, each lasting seven days. Departure cities include Boston; Columbia, South Carolina; St. Paul, Minnesota; Aspen, Colorado; and Reno, Nevada. A sixth ride coincides with the National EMS Weekend of Honor and Memorial Service, to be held July 21-23, in Arlington, Virginia.

During the rides, cyclists forge lifelong friendships. Michelle Martel had never ridden more than a few miles on a road bike when she signed up for her first EMS memorial bike ride seven years ago.

She felt immediately at home. Martel, a heavy equipment and snowplow operator and volunteer EMT-firefighter in Kennebunkport, Maine, hasn't missed a ride since. "All of these people, they are my family now. I couldn't imagine going more than a year without seeing them," Martel said.

While there is plenty of laughter on their journey, some years are tougher, like the year after she lost one of her close friends, Isaac Greenlaw, who died by suicide in 2018. Greenlaw, a fire captain with Levant Fire and Rescue in Maine, was a warm and generous man who was a fixture on the memorial rides. He had made her feel welcome when she was a rookie rider. His death at age 41 came as shock. "There wasn't a dry eye in the place," she recalls. Every year since, she has ridden with his dog tags,

Remaining National EMS Memorial Bike Rides for 2023 include:

- Weekend of Honor, a single day ride on July 21 covering 40 miles of paved bike paths, ending at the Hyatt Crystal City in Arlington, Virginia, where riders will be greeted by family and friends of the 2023 honorees
- Colorado Route, Sept. 10-15, from Aspen to Morrison, CO
- West Coast Route, Sept. 25-30, from Reno to San Francisco

Register at nemsmbr.org. Honoree application forms for 2023 are closed, but 2024 forms will be available soon.

tucked carefully into her fanny pack for safekeeping.

It takes a community

Planning for the rides is a yearlong endeavor, accomplished with the help of a squadron of volunteers. Routes are mapped out by volunteers, who are also stationed along the route's busier intersections to make sure everyone gets safely through. In the early days, they marked routes with spray paint. Riders now use GPS and a cycling app to help them navigate.

Marta Puffenbarger, a 25-year volunteer EMT from Waynesboro, Virginia, who also volunteers for the memorial rides, says the events are a great opportunity to raise awareness about EMS.

"In every town we stop in, every rest stop, every convenience store or hotel, they see us and ask what we're doing. It's bringing a lot of awareness to the profession and the opportunity to show our communities we are out here and supporting the memories of those we've lost," Puffenbarger said.

All abilities welcome

Each day cyclists cover about 40 miles, although daily rides can be as long as 90 miles. It sounds daunting, but Shaw says that all cycling abilities are welcome. Riders who need a break can catch a ride in the support vehicle that carries their gear from hotel to hotel. Participants can also come out for just a day or two of cycling.

"Nobody is ever left behind. Whether you ride one mile or the entire day, it doesn't matter," Martel said.

While many riders train in preparation for the ride, for others, "the first time they'll be on the bike is the first day of the route. I don't recommend it, but you can do it," said Shaw.

> *Nobody is ever left behind. Whether you ride one mile or the entire day, it doesn't matter.*

To cover costs, the nonprofit organization seeks sponsorships, and riders pay their own way. Registration ranges from $125 for a single day to $450 for four or more days. Travel and hotel costs are additional, and participants need to bring their own gear, including a road bike.

Riders' meals are covered, and they receive two jerseys. At the end of each day's ride, everyone meets up for dinner, which is often supplied by an EMS agency or fire department in the town they are passing through. Every evening, the name of each honoree is read aloud.

"At the end of the ride, we reach out to the families with a note, and send them the dog tags in remembrance of their loved one," Shaw said.

Remembrance and reflection

When possible, the riders also make stops at the stations of paramedics and EMTs who are being honored. Families of the fallen often join them. These times can be emotional, but meaningful for everyone.

"If somebody is having a rough day, everybody sits there and cries with them," Martel said. "Firefighters and EMS are just very loving people."

Paying their respects and listening to bagpipes at St. Patrick's Cathedral in New York City.

Critical crash data before you arrive on scene.

While responding to a crash, you need accurate information quickly. OnStar® and RapidDeploy work together to share critical crash details electronically so you can make more informed decisions for safer on-scene management and field triage **before arriving on scene.** With RapidDeploy, 911 centers can relay vital information that includes vehicle location and propulsion type, air bag deployment, direction of impact, and probability of severe injury.

LEARN MORE AT ONSTAR.COM/RAPIDDEPLOY

OnStar | RapidDeploy

NAEMT

NON-PROFIT ORG.
U.S. POSTAGE
PAID
MILWAUKEE, WI
PERMIT NO. 5279

STUDENT LOAN REFINANCING

NAEMT members get a $300 CASH BONUS when they refinance their student loans.[1]

Discover your personalized rate options online in only a few minute – with no impact to your credit score![2]

Check out special offers for **NAEMT members:**

To learn more, visit laurelroad.com/NAEMT

laurel road

All credit products are subject to credit approval.
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.
2. Checking your rate with Laurel Road only requires a soft credit pull, which will not affect your credit score. To proceed with an application, a hard credit pull will be required, which may affect your credit score.